



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

REHABILITATION & COMMUNITY PROVIDERS ASSOCIATION

APRIL 2015

2015 RCPA Capitol Day

Tuesday, April 14

It's not who you know, it's who you get to know.

Over the past few months, RCPA has been building a strong advocacy/government affairs program by building relationships with those individuals who make and enforce laws impacting the health and human services industry.

On **Tuesday, April 14**, RCPA will be holding its annual **Capitol Day**, giving members the opportunity to interact with legislators and their staff. Members attending Capitol Day have the chance to foster any existing relationships with legislators, while also meeting new policy makers and other RCPA members.

This year, members are asked to [register in advance](#), as teams are being put together to keep the day organized. RCPA is also seeking those who would be interested in being a **team leader** for the day; please respond as soon as possible to sign up. Team leaders will take their groups to meet with assigned legislators. RCPA will furnish handouts to leave with legislators and staff.



- 10:00 am – 11:00 am Registration Open
Capitol Building,
Main Rotunda
- 11:00 am – 2:30 pm Legislator Visits
Main Capitol Steps
- 2:30 pm – 3:30 pm Press Conference/Rally
With Legislators
East Wing Rotunda
- 3:30 pm Capitol Day Concludes

RCPA encourages members, staff, and clients to attend, to help build our advocacy program and get your voice heard on the Hill. Please contact [Jack Phillips](#), director of government affairs, with any questions.

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MEMBER IN THE NEWS

Congratulations...

RCPA congratulates our Board of Directors Co-chair **Susan Blue** of Community Services Group for being chosen as one of the *Central Penn Business Journal* "Women of Influence" for 2015. The winners will be honored at a luncheon on Monday, June 15, at the Hilton Harrisburg.

ON THE AUTISM SPECTRUM

April Is National Autism Awareness Month

The United States recognizes April as a special opportunity to educate the public about autism and issues within the autism community. National Autism Awareness Month represents an excellent opportunity to promote autism awareness, acceptance, and to draw attention to the tens of thousands facing an autism diagnosis each year.

How can your organization, staff, consumers, and families observe Autism Awareness Month?

- Ask your local county commissioners, mayors, and other elected officials, to issue declarations;
- Create or support community and online events and activities;
- Join local events and activities through affiliates;
- Develop partner opportunities; and
- Place an autism symbol (the blue light, the puzzle piece, or ribbon logo) on your building, clothing, and publications.



Connect with your neighborhood—Many autism advocacy, parent support, and autism service providers (like RCPA members), will hold special events in their communities throughout the month of April. RCPA encourages members to participate and support these events, and share the stories of the work you do in your communities.

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This month we touch on a couple of key issues...



Richard S. Edley, PhD

The State Budget

Overall, as a health and human services trade association, it is hard not to like the Wolf Administration proposed budget. Yes, there are taxes, but areas in serious need of funding and support are addressed. We applaud Governor Wolf and the administration for facing these critical needs. As this goes to 'print,' the Department of Human Services will have had initial budget hearings, so we will all know more, and virtually everyone assumes it will be a protracted process with the legislature. Our collective job is to ensure that the gains proposed are not handed over as concessions in the coming months. It is about system viability and sustainability, continued access, and quality.

While there is a lot to like across line items, recognition of the heroin epidemic nationwide and in Pennsylvania is one that is important to highlight. Department of Human Services, the Department of Drug and Alcohol Programs, and Department of Health all have dedicated funds to address this critical issue. In addition, the restoration of the 10% block grant cut needed to happen. In reality, it should never have happened to begin with. It is also notable that long-term care and managed care are proposed, and this could mean many things to our members—especially for brain injury and IDD services.

It is also important for us to see that any newly proposed initiatives are matched with the funding of the current system in place. We know the safety net system is fragile; that needs to be recognized and bolstered to handle any new initiatives.

The Federal Agenda

On March 12, RCPA Medical Rehab/Brain Injury Policy Specialist Melissa Dehoff and I went to Washington, DC to meet with Senators Casey and Toomey and staff, as well as staff from Representatives Meehan (R-7), Shuster (R-9), and Costello (R-6). Melissa Gillis (PinnacleHealth Systems and RCPA board member) and Jack Carroll (Magee Rehabilitation Hospital) also represented RCPA. In addition to reinforcing the presence and importance of RCPA as a large and diverse trade association, two specific issues were addressed:

Medical Rehab—site-neutral payment proposals, and why this is not appropriate; and

Vocational—importance of the federal 14c provision allowing for sub-minimum wage (there is a house bill from Representative Harper of Mississippi asking for the repeal of this).

Numerous other issues were discussed as time allowed, including the raising of minimum wage and the importance of funding such a mandate, as well as the 60% rule for med rehab. Also discussed was overall support for MH, D&A, IDD, rehabilitation, and brain injury services. Pushing the federal agenda is a major initiative for RCPA in 2015, and this was just the first of several planned visits this year.

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

Updated CMCS Home and Community-Based Services Toolkit Available

The Centers for Medicare & Medicaid Services recently updated portions of the *Center for Medicaid and CHIP Services (CMCS) Home and Community-Based Services (HCBS) Toolkit*. Updated versions (Version 1.0) of the *HCBS Basic Element Review Tool for Statewide Transition Plans* and the *HCBS Content Review Tool for Statewide Transition Plans* are now available. This information is part of RCPA's ongoing effort to assist states in meeting regulatory requirements for residential and non-residential home and community-based settings. The full [HCBS toolkit](#), including the updated portions, is available online.

FDA Releases Mobile App on Drug Shortages

On March 4, the Food and Drug Administration (FDA) [announced](#) the release of the agency's first mobile app designed to speed public access to information on drug shortages. The free app identifies current drug shortages, resolved shortages, and discontinuations of drug products. App users can search or browse by a drug's generic name or active ingredient, or browse by therapeutic category. The app can also be used to report a suspected drug shortage or supply issue to the FDA. It was developed as part of the FDA's efforts outlined in the [Strategic Plan for Preventing and Mitigating Drug Shortages](#).

NASUAD State Medicaid Integration Tracker Focuses on Status of State Actions

The National Association of States United for Aging and Disabilities (NASUAD) recently released the monthly [State Medicaid Integration Tracker](#). This month, focus is on the following state actions: Managed Long Term Services and Supports (MLTSS); state demonstrations to integrate care for dual eligible individuals and other Medicare-Medicaid coordination initiatives; and other LTSS activities (Balancing Incentive Program, Medicaid state plan amendments, Community First choice option, and Medicaid health homes).

CMS Announces "Next Generation" ACO Model

On March 10, the Centers for Medicare and Medicaid Services (CMS) announced the [Next Generation Accountable Care Organization \(ACO\) Model](#), the latest Affordable Care Act innovation initiative intended to promote Medicare quality improvement and care coordination. The Next Generation ACO Model differs from the existing Medicare Shared Savings Program and Pioneer ACO models in a number of ways. For example, the Next Generation ACO Model:

- Provides higher levels of risk and reward, using what CMS characterizes as more stable, predictable benchmarking methods, that reward both attainment and improvement in cost containment, and that move away from comparisons to an ACO's historical expenditures;
- Offers a selection of payment mechanisms to shift from fee-for-service reimbursement to capitation; and
- Includes "benefit enhancement" tools to improve engagement with beneficiaries.

CMS plans two rounds of applications for the Next Generation ACO Model in 2015 and 2016, with participation expected to last up to five years. Letters of intent for the 2015 cycle are due May 1 and applications are due June 1.

ALJ Appeal Status Information System Website & Listserv Implemented

The Office of Medicare Hearings and Appeals (OMHA) recently announced implementation of the Administrative Law Judge (ALJ) Appeal Status Information System (AASIS) website. The [AASIS website](#) provides public access to appeal status information and is accessed through the OMHA website. In addition, OMHA recently established a listserv to provide updates that providers can now sign up for. The link to subscribe to the listserv is located at the bottom of the [OMHA home page](#).

CMS Announces Release of 2015 Impact Assessment of Quality Measures Report

On March 2, the Centers for Medicare and Medicaid Services (CMS) released the 2015 *National Impact Assessment of Quality Measures Report*. The report demonstrates that the nation has made progress in improving the health care delivery system to achieve the three aims of better care, smarter spending, and healthier people. This report is a comprehensive assessment of quality measures used by CMS, and summarizes key findings from CMS quality measurement efforts, as well as recommended next steps to improve on these efforts.

CMS Releases New ICD-10 Videos

The Centers for Medicare and Medicaid Services (CMS) has released two animated short videos that explain key ICD-10 concepts. The videos are less than four minutes each and are available on the [Provider Resources](#) webpage. “Introduction to ICD-10 Coding” gives an overview of ICD-10’s features and explains the benefits of the new code set to patients and to the health care community. “ICD-10 Coding and Diabetes” uses diabetes as an example to show how the code set captures important clinical details. An [ICD-10 Website](#) has been created to provide the latest news and resources as providers prepare.

Medicare Shared Savings Program ACO National Provider Call Planned for April 7

On April 7, from 1:30–3:00 pm, the Centers for Medicare and Medicaid Services will conduct a national provider call, offering information on what providers can do to prepare for the Medicare Shared Savings Program application process for the January 1, 2016, start date. The call will also include information on Accountable Care Organizations (ACOs), ACO organizational structure and governance, application key dates, the Notice of Intent to Apply submission, and the first steps in submitting an application. Those interested in participating must [register](#) prior to the call.

NEW MEMBERS

FULL PROVIDER MEMBER

Resources for Human Development, Inc.

Dyann M. Roth, CEO
Philadelphia, PA
www.rhd.org

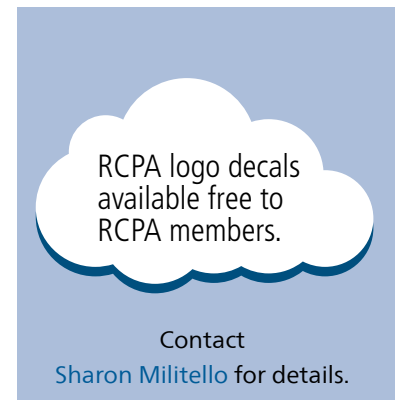
BUSINESS MEMBERS

Cichon Healthcare Consulting

Laverne M. Cichon, MHRP, CPMA
Wexford, PA

The Panto Group, LLC

Donald J. Panto, II, president
Catasauqua, PA
www.thepantogroup.com



STATE NEWS BRIEFS

Governor Wolf Issues Executive Order on Participant-Directed Home Care Services

On February 27, Governor Tom Wolf issued *Executive Order (2015-05)* on Participant-Directed Home Care Services, following suit with his campaign promise to increase access to home and community-based care. Some of the specifics included were: Establishment of the Governor’s Advisory Group on Participant-Directed Home Care to advise on ways to improve the

quality of care delivered through the Home Care Services Programs—which includes the following programs administered by the Office of Long-term Living (OLTL): Aging Waiver Program; Attendant Care Waiver Program; CommCare Waiver Program; Independence Waiver Program; OBRA Waiver Program; and the Act 150 Program. Also relevant issues surrounding direct

care workers such as: quality and availability of participant-directed services; improvement of the recruitment and retention of qualified direct care workers; development of a direct care worker registry; standards for compensation; development of an orientation program; creation of a memorandum of mutual understanding; and compilation of a direct care worker list.

PA Behavioral/Physical Health Collaborative Care Summit

Through the efforts of the state leaders at the Office of Mental Health & Substance Abuse Services, Department of Health, Department of Drug & Alcohol Programs, and Office of Medical Assistance Programs, Pennsylvania will hold a statewide **Collaborative Care Summit** on **April 16** at the **Radisson Hotel Harrisburg**. Planning for the summit was a collaborative process that involved key departments in state government, along with the Pennsylvania Psychiatric Leadership Council, Rehabilitation & Community Providers Association, Pennsylvania Psychiatric Society, Community Care Behavioral Health Organization, Western Psychiatric Institute and Clinic, and the state's Integrated Care Learning Community.

The conference will focus on the importance of increasing the link between individuals' physical and behavioral health care needs and the collaboration between medical and behavioral health professionals. [Speakers will address a broad range of topics](#), including:

- Telemedicine and its benefits in physical and behavioral health;
- Foundational skills of collaborative care;
- Data collection and coordination;
- Comprehensive substance use treatment and effective care coordination in physical and behavioral health settings;
- Payment methodologies; and
- Creating a multidisciplinary team to meet the needs of individuals with complex behavioral and medical conditions.

This conference is free, including CEUs, and is intended for primary care physicians, psychiatrists, and other mental health and health professionals, consumers and their families. RCPA members engaged in providing or planning to provide collaborative or co-located physical and behavioral health care are encouraged to register online [here](#) and to attend with their collaborative care partners.

■ MEDICAL REHABILITATION

MedPAC Releases March Report to Congress

The Medicare Payment Advisory Commission (MedPAC) released its [March 2015 Report to Congress](#) on Medicare Payment Policy, which includes two specific recommendations for inpatient rehabilitation facilities (IRFs):

- Congress should direct the Secretary of Health and Human Services (HHS) to eliminate the differences in payment between IRFs and skilled nursing facilities (SNFs) for selected conditions, commonly referred to as the site-neutral payment policy. The conditions are not identified in the report; however, MedPAC describes the conditions that it considered in its discussion of the policy proposal in [Appendix 7 \(Site Neutral Payments for Select Conditions Treated in Inpatient Rehabilitation Facilities and Skilled Nursing Facilities\)](#). The reductions should be phased in over three years and IRFs should receive relief from regulations specifying the intensity and mix of services for site neutral conditions. MedPAC also states that conditions that are subject to site neutral payments should not count toward the 60% Rule.
- Congress should eliminate the Medicare payment update to IRFs for fiscal year 2016.

CMS Releases Chronic Care Management Services Fact Sheet

The Centers for Medicare and Medicaid Services (CMS) released a [Chronic Care Management Services Fact Sheet](#), now available in downloadable format. This fact sheet is designed to provide background on the separately payable Chronic Care Management (CCM) services for non-face-to-face care coordination services furnished to Medicare beneficiaries with multiple chronic conditions. It includes information on eligible providers and patients, Physician Fee Schedule billing requirements, and a table aligning the CCM Scope of Service Elements and billing requirements with the Certified Electronic Health Record or other electronic technology requirements.

■ BRAIN INJURY

Brain Injury Awareness Resolution Passes

On March 2, [Senate Resolution 38](#) (SR 38) was introduced and adopted unanimously by the full Senate. SR 38 designates the month of March 2015 as “Brain Injury Awareness Month” in Pennsylvania. The resolution provides some of the causes of acquired and traumatic brain injuries, as well as statistics surrounding brain injuries, and resources to promote awareness, prevention, and treatment. See the governor’s proclamation [here](#).

Young NFL Player Retires Over Concussion/Safety Risks

San Francisco 49ers linebacker Chris Borland recently announced his decision to retire from the National Football League at the age of 24. His proactive decision, made after much research and consultation with family, friends, and experts, was made due to concerns about the long-term effects of repetitive head trauma. Borland was one of the NFL’s top rookies this past season. In an [interview](#) with ESPN, Borland indicates, “From what I’ve researched and what I’ve experienced, I don’t think it’s worth the risk.”

CDC Develops Guide For TBI Coverage in News and Social Media

The Centers for Disease Control and Prevention (CDC) has developed the [Guide to Writing About Traumatic Brain Injury in News and Social Media](#), to assist with more informative coverage of traumatic brain injury (TBI) using these outlets. This guide has been designed for media writers, editors, and bloggers, and includes statistics, causes, and signs and symptoms of TBI. Also included is sample press content and story ideas, as well as information for sports writers on how to broaden the content and impact of TBI stories.

■ DRUG & ALCOHOL ACTION

RCPA Continues Work Groups Focused on Regulatory Reform

Two new work groups are being organized to review the Department of Drug and Alcohol Programs licensing problem regulations and the Drug and Alcohol Medical Assistance (MA) outpatient regulations. Gateway Rehabilitation has graciously agreed to host these work group meetings at their offices located in Moon, PA. Call-in information will be available for those who cannot make the trip.

- The **Problem Regulations Work Group** will be meeting the second Wednesday of each month, beginning on April 8, 1:00–3:30 pm.
- The **MA Outpatient Regulations Work Group** will meet the fourth Wednesday of each month, beginning April 22, 1:00–3:30 pm.

A draft of the recommended changes will be sent to all members for review and comment before they are submitted for approval.

RCPA looks forward to working with members on this important step in the process of regulatory reform for the Drug and Alcohol Programs. The first set of regulations that RCPA submitted went through the entire administrative review process and were published—almost exactly as submitted—in the *Pennsylvania Bulletin* in October 2014 and are in effect today.

“The best reason to start an organization is to make meaning; to create a product or service to make the world a better place.”

— Guy Kawasaki

SAVE THE DATE!

Pennsylvania Association of County Drug and Alcohol Administrators
is sponsoring

Case Management Conference and Vendor Fair

May 19–20, 2015

Toftrees Resort and Conference Center, State College, PA

Counties and Providers Welcome

MENTAL HEALTH HEADLINES

Outpatient Regulations Moving Through the Process

During a regular meeting with senior leadership of the Office of Mental Health and Substance Abuse Services (OMHSAS), RCPA staff were informed that the outpatient regulations are with the new Director of Policy for a signature before going to the legislature. There is no definitive timeframe for approval at this time. For those providers who are interested in requesting waivers to the outpatient regulations, the waiver process is available to you. Please ensure that, as part of the process, your agency has the written support of the county and behavioral health managed care organization prior to submitting the waiver request. For more information, please contact [Sarah Eyster](#).

Collaborative Documentation Implementation

In January, the Office of Mental Health and Substance Abuse Services (OMHSAS) released the Collaborative Documentation Guidelines for payors and providers to utilize moving forward. RCPA staff have heard rumblings that nothing has changed—no reimbursement for collaborative documentation to managed care organizations waiting for more directives from OMHSAS. RCPA wants to know what your experience has been in implementing collaborative documentation in your agency and with your payors. Please contact [Sarah Eyster](#) to share your story.

Traditional Medicaid Expansion Is Coming to Pennsylvania

Pennsylvania will soon transition to a simple traditional Medicaid expansion through the existing HealthChoices plans. HealthChoices allows the state to provide greater health care coverage in a streamlined manner to Pennsylvanians who are most in need. No coverage will be immediately impacted by the decision.

Upcoming Milestones of the Transition:

Public Notice of the Adult Benefit Package — Public notice of the new adult benefit package is now available on the DHS website at [HealthChoices Public Notice](#). This notice begins the public comment period on transition to the traditional Medicaid expansion and the new adult benefit package. Members are encouraged to make comments as early as possible, to ensure that RCPA is able to address any concerns or changes. The notice will also be published in the March 28 *Pennsylvania Bulletin*, and available online as of March 27, on the [Pennsylvania Bulletin website](#).

Notice to Current MA Recipients Regarding Benefit Changes — During the last week of March, current Medical Assistance (MA) recipients will have received notices from HealthChoices Managed Care Organizations and Department of Human Services, regarding transition to the new adult benefit package. These notices inform individuals that they will transition to the adult benefit package on April 27.

For more information, visit www.healthchoicespa.com.

Pennsylvania Transportation Alliance

The Pennsylvania Transportation Alliance meetings have focused on issues related to Ride Share and their Transportation Networking Companies. The alliance is developing a position paper to share with legislators regarding issues related to serving individuals with disabilities with these new options such as Uber, Lyft, and Sidecar. Transportation options continue to be an issue for individuals with disabilities, due to limited business hours, paratransit providers not crossing county lines, and some counties not having fixed route systems. These limitations also impact employment opportunities for these individuals.

Recommendations include:

- Fully accessible vehicles for users of power wheel chairs and scooters;
- Public campaigns to promote Ride Share that includes individuals with various disabilities, as well as employment partnerships;
- Modes of communication to include apps, phones, emails, in person, etc.; and
- Support for service animals accompanying persons with disabilities.

Several state legislation bills recently introduced, that the alliance is reviewing, include:

[House Bill 140](#), to repeal sections of Public Law 1211 that state, “An act providing for ridesharing arrangements and providing that certain laws shall be inapplicable to ridesharing arrangements.”

[Senate Bill 447](#), “Regulating Transportation Network Services in Pennsylvania,” includes several sections regarding persons with disabilities and the transportation network company’s responsibilities for these individuals.

RCPA Policy Specialist Linda Drummond is a member of this alliance and encourages members to share [recommendations and suggestions](#).

Balancing Incentives Program

In April 2014, the Departments of Human Services and Aging collaborated in an application to the Centers for Medicare and Medicaid Services titled the “Balancing Incentives Program (BIP).” The purpose of this project is to rebalance long-term supports and services by expanding access to home and community-based services. Pennsylvania has been approved for this program, which will provide \$94 million in additional federal funding. The enhanced funding begins July 1 and continues until September 30.

BIP will offer a “no wrong door” design as an entry point for individuals in services and use standardized assessments and conflict-free case management. The two departments will work together to develop a web page with information on all Medicaid community-based supports for older adults, and those with physical, intellectual, and developmental disabilities, autism, and serious mental illness; an information and referral tool to identify programs providing needed supports;

and a process to improve the length of time in determining eligibility for Medicaid long-term supports.

RCPA Policy Specialists Linda Drummond and Melissa Dehoff participate in the BIP meetings. The recent meetings included discussion of:

- Information, knowledge, and education on home and community-based services, which includes development of an information and referral tool for the BIP website.
- Transitioning individuals from institutional to community-based settings, which addressed barriers, delays in enrollment and the eligibility process, and best transitional practices.
- Local best practices and planning, such as employment programs, cross department collaboration, transportation issues, assistive technology, and home modifications.

ODP UPDATES

The Office of Developmental Programs has released the following information:

Announcement #017-15:

Dennis’s Journey Continues; The video *Dennis’s Journey*, released in 2011, has been updated as he celebrates his 9th anniversary on his job.

Informational Memo #018-15:

Communication Assistance Standards for Individuals who are Deaf; providing clarification to Bulletin #00-14-04, Accessibility of Intellectual Disability Services for Individuals who are Deaf, on topics such as assistance and types of funds to pay for sign language interpreters.

ODP Futures Planning

The February ODP Futures Planning Extended Team meeting reviewed the prioritization developed from the last meeting, discussed themes common to several of the eight near-term objectives, discussed potential changes to the federal Home and Community-Based Waiver Rule Changes, and the revisions to the current Chapter 51 Regulations due to the settlement agreement.

The framework for system change includes organizational structure; policies, procedures, and guidelines; services; funding and contracting; training and technical assistance; and data and performance measurement. Therefore, ODP's next steps will include revisiting work group composition, increasing Objectives Work Group activity between extended team meetings, and discussing challenges and ways to overcome them. RCPA Policy Specialist Linda Drummond will be serving on the Objective #4 Work Group: Meeting Changing Needs (Behavioral and Physical).

APSE Meeting

The March meeting of the Pennsylvania chapter of the Association of People Supporting Employment First (APSE) included an overview of APSE's [National Conference](#), scheduled for June 23–24 in Philadelphia. Sessions will include numerous presentations on the latest innovations in employment for people with disabilities, such as state-of-the-art practices in integrated employment in the areas of transition from school to work, mental health, autism, organizational change, public policy, and funding.

Governor's Cabinet member Devon Grant, and ODP Employment Lead Diane Cashman, provided updates on the state's initiatives on employment first options. Grant is the head of the Employment First State Leadership Mentoring Program (EFLMP). This program is funded by the US Department of Labor, Office of Disability Employment Policy; the goal is to assist transition-age students with disabilities in obtaining gainful employment upon graduation.

The Office of Developmental Programs is working with the Office of Vocational Rehabilitation (OVR) to coordinate efforts regarding requirements of the federal Workforce Innovations and Opportunity Act. This may include school-to-work pilot programs, Early Reach and Project Search. There has been discussion on development of a Governor's Executive Order for Pennsylvania to become an Employment First state for cross-disabilities efforts.

Numerous agencies in the state are members of the [Campaign for What Works](#), and its initiative, *#IWantToWork*. This is a non-partisan coalition to support human services with common-sense solutions for consumers, providers, and taxpayers. *#IWantToWork* is trying to ensure full state and federal funding for OVR to fully support job preparation for transitioning youth beginning at age 15.

Governor's Advisory Committee

The recent meeting of the Governor's Advisory Committee for People with Disabilities, facilitated by Governor's Cabinet Member Devon Grant, featured discussion regarding employment opportunities for those with disabilities, ODP's Future Planning, and the state's involvement with the federal Employment First State Leadership Mentoring Group.

Department of Human Services Secretary Ted Dallas provided an update regarding the Governor's Medicaid Expansion Plan, which will try to minimize transition issues from

ex-Governor Corbett's Healthy PA to this new option. Those on general assistance will be moved to the new Medicaid plan first. The screening assessment will be removed.

Dallas also addressed the need for better cooperation between the Departments of Labor and Industry and Human Services, due to the Rehabilitation Act Reauthorization and the federal Workforce Innovations and Opportunities Act.

ODP Quality Management Director Dolores Frantz provided an update on

this office's Futures Planning initiative. The goal of this effort over the next ten years is to improve the service delivery system for adults with intellectual disability and autism. Numerous stakeholders have been involved in this two-year process, which has developed 12 person-centered, long-range goals and 8 shorter-term objectives. The shorter-term objectives include: budgets based on assessed need; qualified staff; innovation to support families; meeting changing needs; making the system simpler and better; measuring quality; integrated, coordinated care; and employment first.

ODP Chapter 6100 Regulations Work Group

The Department of Human Services ODP is coordinating a Chapter 6100 Regulations Work Group to address revisions to the current [Chapter 51 Regulations](#). ODP has hired Regulatory Consultant Karen Kroh to facilitate this initiative, which is conducting stakeholder meetings every two weeks. RCPA is a member of this work group and seeks [member input](#) regarding needed changes to the current regulations.

Regulations revisions will include addressing the ODP Home and Community-Based Consolidated, Person/Family-Directed Supports, and Autism waivers. The target date for finalization of the new regulations is August 2016, with the effective dates being December 2016 through July 2018.

The meetings are open to the public as observers. Draft regulations will be out for 30-day public comment, once the regulations packet has been submitted to the independent Regulatory Review Commission, and the Senate Standing Committees and Legislative Reference Bureau.

Note the following, regarding scope of the regulations:

- Will be coordinated with the new Adult Protective Services Regulations;
- Will not be applicable to the Adult Community Autism Program or Intermediate Care Facilities; and
- Federal Centers for Medicare and Medicaid final rules will be addressed, including topics such as residential leases and inclusion in the community.

Joint Aging/ID

The state Departments of Human Services and Aging Joint Committee on Aging/Intellectual Disability's mission is to promote quality of living as determined by the individual, as well as full community, including for all older citizens with an intellectual disability. The committee makes recommendations to the departments concerning policies, innovative services, supports, and funding. These activities include the annual cross-systems Building Bridges Conference, and annual funding to counties for cross-systems trainings and case review at the local level. RCPA Policy Specialist Linda Drummond is a member of this joint committee.

County ID and Aging teams approved funding, totaling \$35,000 for 2015, include: Allegheny, Cameron, Elk, Potter, McKean, Warren, Forest, Clearfield, Jefferson, Carbon, Monroe, Pike, Clarion, Columbia, Montour, Union, Snyder, Cumberland, Perry, Delaware, Fayette, Lehigh, Luzerne, Wyoming, Wayne, and Westmoreland.

The annual Building Bridges Conference is under development and is scheduled for September 15–16 at the Holiday Inn, Grantville. Please share ideas on topics and speakers with [Linda Drummond](#).



RCPA ANNUAL MEETING
AND
Senior Leadership Summit
May 19–20, 2015

Behavior Specialist – ASD Update

RCPA recently followed up with the Department of State to gauge the service system capacity, and level of activity, for professionals applying for their Behavior Specialist License to work with children on the autism spectrum. The good news is that the Department of State reports that there is no longer a backlog in applications. Recent information is that there have been 3,343 applications with 2,678 licenses issued. To date, however, about one in five applicants have either been unable to meet the current requirements, or have abandoned the effort to obtain a Behavior Specialist license in Pennsylvania. Another area of concern is that for 34 of the most recent license applications, the Department of State issued letters noting 179 application discrepancies related to them. While there are other licensed professionals eligible to bill Medicaid and commercial insurance for Behavior Specialist Consultant-Autism Spectrum Disorder (BSC-ASD) services, it would appear that the number of BSC-ASD professionals is well short of the 4,000 BSC-ASD staff that had been providing just the Medicaid-funded services to children with autism. RCPA continues to inquire about local and statewide provider network adequacy, and the capacity of the HealthChoices and commercial insurance networks to meet the needs of its members in an adequate and timely manner.

Children's Committee Meeting: Focus on Provider Recovery

Many child-serving organizations recall an era not long ago when the focus was on promising practices, coordinated care across systems, and a robust array of services for children, adolescents, and families in nearly every community in the state. The recent years of economic downturn, and diminished funding and services, left many organizations thinking in terms of resiliency, recovery, and sustainability—not just for those people they serve, but also the programs and services they do or once did provide in their communities. The April meeting of the Children's Committee will be an opportunity for members to discuss challenges of the past few years, strategies they found to sustain their programs, and RCPA efforts to support and advocate for sustainable programs and services, both old and new. In addition, the meeting and webcast will feature guests from the Penn State EPICenter, who will also review current challenges in their work with community providers of evidence-based programs and discuss the shared challenges to the sustainability of evidence-based approaches.

After Columbine – Prevention, Protection, or Both?

On April 20, 1999, Melissa Reeves and her fellow school psychologists were tasked with trying to address the trauma of students who had escaped the carnage at Columbine High School. As the chair of the National Association of School Psychologists School Safety and Crisis Response Committee, Reeves believes striking a balance between building security, and mental health prevention and intervention efforts, is critical for long-term impact, rather than districts spending thousands of dollars turning schools into "New Age bunkers." Having both the academic perspective and the life experience, this school psychologist presents an array of important concepts and questions for educators, mental health professionals, students, and parents in a recent interview in the *Atlantic*.

Since Columbine, the nation—and Pennsylvania—have too often seen school violence, and even active shooters incidents and drills. Reeves notes that in case after case, the students intent on harming themselves and others arrived at school "loaded" with emotional disturbance, mental illness, and traumatic life events. In Pennsylvania, many schools have invested in metal detectors, active shooter training, cameras, and armed school resource officers. As we are again reminded of the events that occurred in Columbine, Sandy Hook, and elsewhere, Pennsylvania's schools and community mental health partners are also investing in youth mental health first aid, school-wide positive behavior intervention and supports, providing new screening tools to Student Assistance Program liaisons, and expanding school-based mental health care to our students. We know that one student in five is likely to have a mental health care need, while the chance of any student dying in a school-related shooting is one in 2.5 million.

Mental Health Caucus Discusses School Mental Health

The first meeting of the newly formed Mental Health Caucus of the state's House of Representatives focused on school based mental health needs, promising practices, and continuing challenges. RCPA staff and the children's team leaders for the Disability Rights Network provided a brief history of the growing collaboration between local schools and community behavioral health providers. RCPA staff reviewed with legislators the growth of Pennsylvania's schools, and their mental health service system partners, who are increasingly organizing social and emotional wellness and mental health interventions, within a public health (and now public education) "pyramid" of universal, secondary, and tertiary prevention and intervention.

While community mental health providers are participants in all levels of the pyramid model of School Wide Positive Behavior Intervention and Support (SWPBIS), they are most often involved in serving what is seen as the 3–5 percent of students in need of clinical treatment interventions. Focusing on the mental health needs of students, RCPA staff reviewed the *Pennsylvania Youth Survey* with caucus members, which reflects the responses of over 200,000 students. The depression and suicide-related survey findings alone demonstrated that for a classroom of 25 average tenth-graders in Pennsylvania:

- Five students in the class have considered suicide in the past year (20.4%);
- Four students in the class have planned to commit suicide in the past year (15.7%);
- Two to three of the students report that they attempted suicide in the past year (9.6%); and
- Odds are 50/50 that at least one student in the class required medical treatment for a suicide attempt.

Beyond the mental health challenges faced by students, schools, and communities, members of the School Based Mental Health Community of Practices, along with school and mental health leadership, provided the members with background on the growth of SWPBIS, the Student Assistance Program, Youth Mental Health First Aid, and other collaborative initiatives in local schools.

Youth Suicide Prevention Project Director

The OMHSAS Children's Bureau has announced the appointment of Perri Rosen, PhD, as project director for the Garrett Lee Smith Suicide Prevention in Schools and Colleges federal grant. Rosen has extensive experience working with children and youth, most recently serving as a school psychologist. Dr. Rosen will be responsible for developing and implementing statewide youth suicide prevention and early intervention strategies across Pennsylvania. The five-year grant will focus on youth suicide prevention efforts in school districts, community colleges, and universities throughout the state. The project will center on work with Student Assistance Program teams to identify students at risk for suicide, and provide behavioral health support in school.

OCYF Rate Methodology Task Force Final Report

The Office of Children, Youth and Families (OCYF), along with members of the Rate Methodology Task Force, completed a key task in the 18-month process that began in July 2013 with the signing of Act 55. Since that time, OCYF was required through the work of the task force to provide recommendations to the state legislature for "a methodology to determine reimbursement for actual and projected costs of child welfare services which are reasonable and allowable." An informational meeting recently brought together OCYF, counties, private providers, and key fiscal consultants, to review the rate methodology recommendations created for in-home and community (other purchased services) by the task force. The reports and recommendations available here have been submitted to the legislature and are awaiting action.

- [In-Home Rate Methodology Report and Recommendations](#)
- [Out-of-home Rate Methodology Report and Recommendations](#)
- [Out-of-home Rate Meeting PowerPoint](#)

RCPA staff and members were active participants in the Rate Methodology Task Force, and commend the work of OCYF and colleagues in the county and private provider community, who contributed to the collaborative and constructive process of the task force.

STAP Capacity and Program Survey

In March 2013, the association conducted a survey of child mental health providers to gauge the impact of *Behavioral Health Rehabilitation Services* (BHRS) redesign. The findings from that survey showed a very significant reduction in Therapeutic Staff Support services, Summer Therapeutic Activity Programs (STAP), and several other child mental health services, especially in rural communities.

As spring arrives, RCPA is conducting a survey to gauge the availability and capacity of STAP services and the degree of change since 2011. RCPA is requesting all former and current STAP providers to complete this brief, but important, [assessment](#) of the changes in STAP programs in communities in Pennsylvania. In our effort to determine the impact of changes reported by providers, this survey is open to both RCPA members and non-members. Please share this request for information with other provider organizations. A report on the survey findings will be made at the April 13 meeting of the RCPA Children's Committee.

Governor's Budget Proposal's Impact for Children's Services

The first budget of the Wolf administration is out and the process of discussion, hard negotiation, and compromise has begun. For RCPA members, this is also the time for advocacy on behalf of the programs provided and citizens served. In addition to the potential impact of changes in the tax structure and "living wage" elements of the budget, some of the ways the proposed budget may impact children's service providers include:

Health Care

The governor's proposed 2015/16 budget decreases state funding for the Children's Health Insurance Program (CHIP) by \$84 million. This reflects the anticipated increase in federal financial reimbursement for CHIP, and savings achieved through the shift of approximately 30,000 children from CHIP to Medicaid in 2014. The governor's proposed budget also includes a new investment of \$25 million for an initiative called "Closing the Coverage Gap," to provide health insurance coverage for nearly 16,000 additional children.

Child Welfare

The proposed budget includes an increase of more than \$40 million for county child welfare services. One target for the increase is rapidly growing child protective services investigations and caseloads. The governor is proposing an \$8.2 million increase for the developing Pennsylvania's Child Welfare Information System.

Early Care and Education

- The governor's proposed budget prioritizes the expansion of high-quality pre-kindergarten, calling for an additional \$120 million.
- The proposal virtually doubles the funding for Pre-K counts to \$197.3 million, up from the current \$97.3 million.
- Funding for the Head Start Supplemental Assistance Program would increase by \$20 million, for a total state allocation of \$59.2 million.
- The budget proposal would maintain level funding for early intervention services, Nurse-Family Partnership, child care subsidies for low-income, working families, and quality initiatives such as Keystone STARS.
- Anticipated federal increases to the Child Care and Development Block Grant and TANF could enable Pennsylvania to serve an additional 3,600 children on the waiting list and increase reimbursement rates for STAR 3 and 4 facilities.

Regular and Special Education

The governor's proposed budget would increase basic education funding in fiscal year 2015/16 by \$400 million, a 7% increase to \$6.13 billion. Special education would be increased \$100 million, equal to 10% of \$1.147 billion. As noted by the Pennsylvania Partnership for Children and others, state funding for special education has increased only once in the past six fiscal years (a 2% increase in fiscal year 2014/15).



The Vista School®

1021 Springboard Drive
Hershey, PA 17033
(717) 583-5102

The Vista School brings state-of-the-art special education and therapeutic services to children living with autism in Central Pennsylvania. In 2002, a group of highly committed parents and professionals, seeking to create an alternative educational and therapeutic program, established The Vista School to prepare children with Autism Spectrum Disorder (ASD) to function in the community with increasing independence. Vista uses the principles and techniques of Applied Behavior Analysis (ABA), Precision Teaching (PT), and Direct Instruction (DI) to design, implement, monitor, and evaluate instruction and therapy for its students. Vista currently serves 92 children with ASD ranging from pre-kindergarten to secondary school age.

Vista Adult Services Organization (VASO) is a community-enriched adult services program that focuses on developing functional life skills for those with autism that foster independence within activities of daily living, enhanced social/communications abilities, and entrance to employment.

POSITIONS AVAILABLE

Behavioral Consultant

The behavioral consultant, in collaboration with other members of the treatment team, designs and directs the implementation of a behavior modification intervention plan which is individualized to each student and to family needs. This includes assessment, treatment plan development, implementation, monitoring, and adjustment in the school and in the home.

- BCBA certification, Behavior Specialist license, and master's degree in related field required
- 3–5 years of clinical experience working with children with Autism Spectrum Disorders (ASD) preferred

Apply at <https://csstvs.sentrchr.com/default.aspx?Requisition=11>

Residential Services Program Director

The residential services program director will lead the design, development, and ongoing administration of the VASO Residential Program. This dynamic role will allow the incumbent to create this program in its entirety, from conception through implementation. This is a rare opportunity not only to make a difference in the lives of adults with autism, but to realize a dream of building a legacy within our organization.

- Bachelor's degree in Business Administration, Social Services Administration, or closely related field required; master's degree preferred
- Must have minimum 7–10 years' progressive experience in administration and leadership

Apply at <https://csstvs.sentrchr.com/default.aspx?Requisition=7>

Employment Specialist

The employment specialist assesses job seeker needs, skills, and required accommodations in relation to acquiring and maintaining employment. The employment specialist establishes relationships with competitive employers and forms mutually beneficial relationships between the identified businesses and job seekers. This role educates the job seeker on acquiring and maintaining appropriate pay and benefits.

- High school diploma required; bachelor's degree preferred
- Must have minimum 1–3 years of pre-employment and employment sourcing experience

Apply at <https://csstvs.sentrchr.com/default.aspx?Requisition=13>



COMMUNITY
SERVICES GROUP

Community Services Group (CSG), a leading provider of quality, community-based mental health (MH), intellectual and developmental disability (IDD), child and youth, and autism services throughout central and northeastern Pennsylvania since 1972, is recruiting for a **senior manager** to join our team of dedicated professionals!

The senior manager reports to the VP of IDD Services, will be based out of CSG's Williamsport office, and will have oversight of multicounty areas. The nature of the work is professional, administrative, and managerial, directing the operations of multiple services and programs, and providing leadership to program directors.

To be considered, you must be a graduate of an accredited college or university with a master's degree in human services, or related field, and have two years of supervisory or administrative experience working directly with individuals in MH and/or IDD programs.

To apply, or for additional details, please visit **CSG's Career Site**.

A competitive salary and comprehensive benefits package are provided, including medical insurance (medical, prescription, dental, and vision coverage), travel reimbursement, generous Paid Time Off (PTO), 401K, life insurance, and more.

Love your job and feel good at the end of the day by joining our team!!!

Community Services Group is an Equal Opportunity Employer.

At Relias, we
focus on learning
every day.

RELIAS
LEARNING



Take a test drive of our newest adult learning courses.



healthcare.gov

Need Health Insurance? Check out Special Enrollment Periods.

If you are a taxpayer who discovered you have to pay a penalty for not having health insurance in 2014, you may be eligible for a Special Enrollment Period to sign up for insurance through www.healthcare.gov and the Health Insurance Marketplace until April 30, 2015.

You may also be eligible to enroll in the Health Insurance Marketplace created by the Affordable Care Act past the February 15, 2015 Open Enrollment deadline if you:

- Recently married
- Gave birth to or adopted a child
- Had a change in immigration status
- Were released from incarceration
- Received an exemption from the Marketplace but now have a higher income
- Lost health insurance coverage due to:
 - Left or lost a job
 - Divorce
 - Turned 26 and lost coverage on a parent's plan
 - Lost eligibility for Medicaid or CHIP

If any of these events apply to you, you have **60 days from the time the event occurs** to sign up for health insurance through the Marketplace.

The next **Open Enrollment** is November 1, 2015 through January 31, 2016.

Visit www.healthcare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325) 24 hours a day, 7 days a week to enroll.

For help, contact a **Marketplace Navigator** in Pennsylvania at 1-855-274-5626, daytime work hours. They are located around the state and are part of a consortium of Pennsylvania Mental Health Consumers' Association, Mental Health Association of Pennsylvania, Mental Health America in Westmoreland County and The Advocacy Alliance.



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■ CALENDAR

APRIL		
Tuesday, April 7	12:00 pm – 1:00 pm	IPRC Webinar Dosing Rehabilitation Interventions for Children with Cerebral Palsy: Linking Structural and Functional Changes for the Musculoskeletal System
Monday, April 13	9:30 am – 12:00 pm 9:30 am – 12:00 pm 1:00 pm – 4:00 pm 1:00 pm – 4:30 pm	Criminal Justice Committee Mental Health Committee Drug & Alcohol Committee Children’s Committee <i>Penn Grant Centre</i>
Tuesday, April 14		RCPA Capitol Day Capitol Building Harrisburg, PA
Thursday, April 16	9:00 am – 11:00 am 11:30 am – 2:30 pm 2:45 pm – 4:45 pm	Supports Coordination Organization Subcommittee Intellectual/Developmental Disabilities Committee Vocational Rehabilitation Subcommittee <i>Penn Grant Centre</i>
MAY		
Thursday, May 7	10:00 am – 2:00 pm	SE Regional Meeting <i>Eagleview Hospital – Conference Center</i> 100 Eagleview Road • Eagleview, PA 19403
Monday, May 11	10:00 am – 12:30 pm	Government Affairs Committee <i>Penn Grant Centre</i>
Wednesday, May 13	10:00 am – 2:00 pm 10:00 am – 12:30 pm	Brain Injury Committee Human Resources Committee <i>Penn Grant Centre</i>
Thursday, May 14	10:00 am – 12:30 pm	Outpatient Rehabilitation Committee <i>Penn Grant Centre</i>
Tuesday, Wednesday, May 19–20		Leadership Summit — Annual Meeting <i>Best Western Premier</i>