



A Message from the CEO Annual Conference Made the “Connection”

By all accounts, and from the feedback received thus far, the 2017 RCPA Annual Conference was a major success. It was our second year at the Hershey Lodge and we worked hard to improve in all the areas noted from our successful kickoff last year. This included everything from the flow and timing of the conference, use of the exhibit hall, quality and range of speakers, to the many networking events and opportunities.

With 770+ attendees and nearly 80 exhibitors, this year’s conference also proved to be the largest to date for RCPA and its predecessor associations.

The annual conference began with a presentation from DHS Secretary Teresa Miller, who also answered questions from the audience for nearly 40 minutes. The conference wrapped up with a presentation from SAMHSA Regional Administrator Jean Bennett, followed by a panel presentation from several key DHS Deputy Secretaries (ODP Nancy Thaler, OLTL Jen Burnett, OMHSAS Ellen DiDomenico, OMAP Leesa Allen), Secretary of Aging Teresa Osborne, and Secretary of DDAP Jen Smith. That panel was led by Charlie Curie, past OMHSAS Deputy Director and past Administrator of SAMHSA.



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3	Membership
4	Conference Recap
7	Government Affairs
8	Federal News
9	State News
11	Medical Rehabilitation
12	Brain Injury
12	Physical Disabilities & Aging
14	Mental Health
15	Drug & Alcohol
16	IDD
17	Children's Services
19	Calendar



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Members in the News

Hope Celebrates 10 Years of Residential Service to Columbia, Montour, Snyder, and Union Counties

RCPA congratulates Hope Enterprises on this accomplishment. See their [full press release](#) for details. ◀



Senator Toomey Visits Hope Enterprises

On Friday, September 29, Sen. Pat Toomey visited Hope Enterprises' Reach Road facility, touring the organization's Innovations Day Program and Business Industrial Services Center and meeting with Hope's senior leadership, management staff, board members, and individuals. See the [full story here](#). ◀



PROVIDER MEMBER

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As the largest state association of its kind, RCPA continues to look for ways to strengthen its voice. One way to facilitate this is by the recruitment of new members. For new provider members, there are financial incentives for the first two years of membership. If you have questions about membership or know of an organization that would benefit from membership with RCPA, please contact [Tieanna Lloyd](#), Accounts Receivable/Membership Services Manager.

Visit the [RCPA website](#) for up-to-date information on legislation, meetings, trainings, and other industry developments. ◀

Conference Recap

continued from front page

In between were many other highlights, including national updates from the National Council (Nina Marshall), ANCOR (Gabriele Sedor), and ACCSES (Terry Frammer, Kate McSweeney), the Penn State Business School Executive Leadership track, and a presentation from Physician General Rachel Levine, MD (Governor Wolf just nominated Dr. Levine as Dept. of Health Secretary). An awards dinner recognizing individuals and accomplishments from many sectors of health and human services was well received. This included honoring state Senator Lisa Baker for her legislative leadership and Gavin Kerr (retired, Inglis House) for lifetime achievement, as well as other award winners.

We hope that attendees also had an opportunity to explore Hershey, PA and all that the area has to offer.



Conference Recap

continued from page 4

So what's next?

To build even further on the success and size of the conference! We will carefully be reviewing all the comments we receive and tweak the design of the conference even further for next year. We are proud of this year's event and we soon will begin designing the 2018 RCPA Annual Conference.

Upcoming Regional Meetings

With the conference now over, we are putting a focus on our upcoming regional meetings in November. The structure of these meetings will be a little different than in the past. Specifically, in May the RCPA Board had a strategic retreat. There were several themes that came from that meeting:

1. Continue and expand cross collaboration with other associations;
2. Work on further branding and marketing;
3. More strategic use of meetings, including regional meetings;
4. Continued focus on managed care impact and initiatives;
5. Continued proactive focus on government affairs; and
6. Use of data, analytics, and technology.

As we debriefed from that retreat and analyzed next steps, we also decided it would be a good time to take the pulse of the membership, specifically asking questions of members that will help inform the future direction of

RCPA. Why are you a member? What should we do more of or differently? Where should we be as an association in one year? In five years? And so forth.

Rather than do another traditional email survey, we thought that using the upcoming regional meetings as "focus groups" would better serve this purpose. So we have enlisted a consultant and we will be using the regional meetings as "focus groups," followed by a shorter update from division staff. This may be followed by a user-friendly survey which will target certain areas that emerge from the focus group discussions.

We hope to see you at these meetings and specifically request that leadership from our member organizations be present for these important discussions.

Richard S. Edley, PhD, President/CEO

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



continued on page 6

Conference Recap

continued from page 5

RCPA Annual Conference Awards Results:

1. Administrative Leadership – Shannon Fagan, Children's Bureau, OMHSAS
2. Community Leadership – Jessica Petrongolo, Bryn Mawr
3. Community Leadership – Bonnie Breit, BRB Consulting (not pictured)
4. Innovation – Dr. Richard Sabousky, Clarion University
5. Innovation – Deb Wasilchak, Community Care Behavioral Health
6. Legislative Leadership – Senator Lisa Baker, PA Senate
7. Lifetime Achievement – Gavin Kerr, Inglis Foundation (retired)



Congratulations to all of the 2017 RCPA Award Winners!



RCPA gave out four \$250 gift cards, sponsored by Qualifacts at the Exhibit Hall Prize Giveaway! A wonderful selection of other prizes were won by lucky participants, sponsored by our vendors.



Congratulations to Exhibit Hall Best in Show Winner Salisbury House!



The association extends a special thank you to our sponsors, exhibitors, advertisers, and presenters, for helping to provide an outstanding conference to our membership!

The \$75k Challenge

Now, more than ever, health and human service providers need to be proactive in helping elected officials work towards common sense solutions in the areas of workforce, tax, regulation, health care, and human services.

So, the Rehabilitation and Community Providers Association Political Action Committee (RCPA-PAC) is challenging members to help us raise \$75,000. Specifically, we are looking for 75 member organizations to raise \$1,000 each. Members can raise the \$1,000 by doing a number of fun activities and including staff, such as staff members pay \$5 to wear jeans, or let your employees buy a chance to throw a pie in the CEO's face. We need YOU and YOUR STAFF to help us reach this goal because it provides an avenue for our members and staff to make a meaningful impact on the political process.

Interested in learning about more fun ideas to raise money for RCPA-PAC or interested in donating now? Please visit our [website](#), download the [PAC FAQ Card](#), [Donation Card](#), or email [Jack Phillips](#), RCPA Director of Government Affairs.

Your participation in the RCPA-PAC is completely voluntary and you may contribute as much or as little as you choose. Donations are not tax-deductible and will be used for political purposes. You may choose not to participate without fear of reprisal. You will not be favored or disadvantaged by reason of the amount of your contribution or decision not to contribute. ◀

Legislative Tracking Report

RCPA is constantly tracking various policy initiatives and legislation that may have positive or negative effects on our members and those we serve — so for your convenience, RCPA has created a [legislative tracking report](#). You can review this tracking report to see the legislative initiatives that the General Assembly may undertake during the 2017/18 Legislative Session by clicking on the policy area at the bottom of the spreadsheet. If you have questions on a specific bill or policy, please contact [Jack Phillips](#). ◀

RCPA Government Affairs Making Great Strides

If you were at the most recent committee meetings, or at RCPA's Annual Conference in Hershey, you might have heard that RCPA is stepping up its government affairs efforts. Over the past two or more years, RCPA has made great inroads with the Pennsylvania General Assembly regarding our name recognition as well as becoming a resource for legislators and their staff on health and human services issues.

Now, RCPA wants to become more proactive with its legislative efforts. Specifically, RCPA staff has redesigned its legislative tracking report to make it more user friendly, and staff will be working with each of RCPA's policy committees to identify legislative priorities that RCPA can pursue on behalf of its members. RCPA staff requests that members look at the legislative tracking report (see above) and provide comments on those bills that may have a positive or negative impact on how members conduct business. If you have any questions, please contact [Jack Phillips](#). ◀



CMS Produces New Video Focusing on Part A and B Appeals

The Centers for Medicare and Medicaid Services (CMS) has made available to providers a new educational [YouTube video](#) that provides an overview of the Medicare Part A and Part B appeals process. The video reviews the five levels of claims appeal, the new Level Three On-The-Record review option, and helpful tips for filing an appeal. ◀



Social Security Announces Cost of Living Increase in 2018

In mid-October, the Social Security Administration (SSA) [announced](#) that monthly Social Security and Supplemental Security Income (SSI) benefits will increase two percent in 2018. ◀

Amount in Controversy Threshold Amounts for CY 2018 Announced

The Centers for Medicare and Medicaid Services (CMS) announced and published the amount in controversy (AIC) threshold amounts for calendar year (CY) 2018 for Administrative Law Judge (ALJ) hearings and judicial review under the Medicare appeals process. The notice was published in the September 29, 2017 [Federal Register](#). The amounts become effective on January 1, 2018. ◀



CHRONIC Care Act Passed by Senate

The Senate unanimously [passed](#) the CHRONIC Care Act (S. 870), legislation led by the Senate Finance Committee to strengthen and improve health outcomes for Medicare beneficiaries living with chronic conditions by increasing the use of telehealth, extending the Independence at Home (IAH) demonstration, increasing the cap on the total number of participating beneficiaries from 10,000 to 15,000, and giving practices three years to receive a shared savings payment. According to the [cost estimate](#) from the Congressional Budget Office (CBO), the legislation would be budget neutral in which the 10-year costs of the legislation – including expanding the use of telehealth for individuals with stroke (\$180 million), providing continued access to Medicare Advantage special needs plans for vulnerable populations (\$123 million), and expanding the testing of the Centers for Medicare and Medicaid Innovations (CMMI) Value-Based Insurance Design (VBID) Model (\$90 million) – would be offset by eliminating \$370 million of funding from the Medicare Improvement Fund. ◀

OLTL Waiver Amendments Posted to DHS Website

The Office of Long-Term Living (OLTL) recently announced the waiver amendments effective as of October 1, 2017 have been posted to the Department of Human Services (DHS) website. The waivers include: [Aging Waiver](#); [Attendant Care Waiver](#); [Independence Waiver](#); and [OBRA Waiver](#). Questions related to this communication may be directed to the OLTL Bureau of Policy and Regulatory Management at 717-783-8412. ◀

CHC Training Modules Now Available

The Office of Long-Term Living (OLTL) has placed the latest Community HealthChoices (CHC) training modules on the CHC [website](#). ◀

Independent Evaluation of CHC to Be Conducted Via Survey

The Medicaid Research Center at the University of Pittsburgh will be conducting an independent evaluation of the Community HealthChoices (CHC) program. An invitation to participate in an online survey is being sent out by email to all current Home and Community-based Services (HCBS) providers. The purpose of the survey is to ask about their current awareness and preparation for CHC. This information will be used to assist the Office of Long-Term Living (OLTL) and the Department of Human Services (DHS) in improving the new program. All current HCBS providers will be receiving an email from the Medicaid Research Center to participate. If a member does not receive an email invitation to the survey, please [email](#) or call 412-452-4035. For more information on the evaluation, visit this [web page](#). ◀



DHS Issues Community HealthChoices Information & Resources

The Department of Human Services (DHS) recently issued the following information and resources in preparation for the roll-out of Community HealthChoices (CHC) beginning January 2018 in the Southwest zone of the state:

COMING TO THE SOUTHWEST ZONE IN JANUARY 2018

The Department of Human Services (DHS) is committed to open and frequent communication to educate and inform individuals who will move to Community HealthChoices (CHC). It is critical that they are aware of the upcoming changes and are able to make an informed decision on their plan selection. We are using multiple channels to get the message out, and want to ensure that you are aware of upcoming information that potential participants will receive.

INFORMATIONAL FLYER

Participants in the Southwest Zone received [this flyer](#) (also available in Spanish) in August 2017 to inform them that CHC was coming to their county in January 2018.

CHC COMMUNITY MEETINGS FOR PARTICIPANTS

Participants in the Southwest received an invitation to community meetings in late September. There will be more than 40 events in the Southwest Zone, with at least one in each of the 14 impacted counties. The meetings will give more information about CHC, the [LIFE program](#), and answer questions participants may have. To register for a community meeting, participants can visit the [CHC website](#) or call 833-735-4416. A copy of the invitation is available [here](#).

NOTICES

DHS is mailing notices to potential participants. The notice will inform participants that they will transition to CHC in January and need to select a health plan, also called a managed care organization (MCO). The notice also tells potentially eligible participants that they may be eligible for the LIFE program. Copies of the notices are available [here](#).

PRE-ENROLLMENT PACKETS

Beginning on October 2, 2017, pre-enrollment packets were mailed to participants. This packet contains information about each of the health plans and the benefits offered by each plan, and tell participants how to enroll in a health plan. There is a toll-free number and website for participants to use to make their selections. A day after the packets were mailed, automated calls were made to let participants know that the packets were coming. If participants do not select a health plan, they will get a follow-up call. Individuals who do not select a plan by November 13, 2017, will be assigned to a plan. Individuals can change their plan at any time.

SOCIAL MEDIA

DHS' [Facebook](#), [Twitter](#), and [YouTube](#) accounts make CHC information readily available. If you are not following them yet, please click the provided links to make sure you are receiving all up-to-date information on CHC and all department priorities. ◀



List of IRFs That Met QRP Requirements for APU FY 2018 Posted by CMS

The Centers for Medicare and Medicaid Services (CMS) has [published](#) the list of the inpatient rehabilitation facilities (IRFs) and units that successfully met their respective quality reporting program (QRP) requirements after all reconsideration requests have been processed. The IRFs that are compliant with the IRF QRP requirements will receive the full annual payment update (APU) for fiscal year (FY) 2018. ◀



DHS Issues Notice on Supplemental Payment to High Volume Special Rehab Facilities

The Department of Human Services (DHS) published a [notice](#) in the September 23, 2017 edition of the Pennsylvania Bulletin that they intend to make a supplemental payment in fiscal year (FY) 2017/2018 to certain special rehabilitation facilities (SRFs) that have high Medical Assistance (MA) and total facility occupancy levels. An SRF is one that specializes in providing services and care to adults who have a neurological/neuromuscular diagnosis and condition, as well as severe functional limitations. Because of the complex needs of these individuals, SRFs typically incur staffing and specialized medical equipment costs that are very high. Additionally, SRFs with high MA and total facility occupancy levels are dependent on MA payments to continue to operate. To help offset the higher costs incurred by these SRFs while they reconfigure to home and community-based services, DHS intends to make a supplemental payment to these facilities to assure that the unique services they provide continue to be available to MA beneficiaries.



To qualify for an MA dependency payment the following requirements must be met:

- Be classified as an SRF as of the cost report end date;
- Have MA occupancy greater than or equal to 94% as reported on Schedule A, Column A, Line 5 of the cost report;
- Have an overall nursing facility occupancy greater than or equal to 95% as reported on Schedule A, Column A, Line 4 of the cost report; and
- Have at least 200 MA certified nursing facility beds as of the cost report end date.

DHS accepted comments through mid-October. ◀

CMS Identifies Issue With IRF Provider Threshold Report

The Centers for Medicare and Medicaid Services (CMS) posted an [alert](#) on October 3, 2017, noting they identified an issue with the fiscal year (FY) 2019 inpatient rehabilitation facility (IRF) Provider Threshold Report. The issue resulted in the display of zeroes in the Data Completion threshold column for the measure Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (NQF #0678). This error has resulted from the change in the items used to calculate the pressure ulcer measure (effective as of October 1, 2016), as well as the coding logic behind those changes. Due to the positive feedback regarding the value of this report in monitoring data submission for the CDC/NHSN quality measures, the decision was made to keep this report in production while CMS works to update it to include all of the measures currently required for APU compliance determination. ◀

Members of Energy & Commerce Committee Hold Forum to Discuss TBI in Sports

On October 13, 2017, the House Democratic members of the Energy and Commerce and Judiciary committees hosted a [forum](#) to discuss traumatic brain injuries (TBI). Doctors and brain injury specialists testified on the latest research on chronic traumatic encephalopathy, or CTE. Former NFL players and family members also testified about their experiences and health challenges since their time playing football, and shared their observations about what the NFL and private youth football organizations are doing — or not doing — to address player safety. ◀

New Department of Defense Videos Feature Veterans Sharing TBI Experiences

Veterans are featured in new video profiles released by A Head for the Future, a traumatic brain injury (TBI) awareness initiative by the Department of Defense (DoD) that shares stories of TBI recovery and hope. The videos are available on the *A Head for the Future* [website](#) and on the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury's [YouTube](#) channel. "The videos highlight how important it is for our military community to prevent, recognize, and recover from a TBI. We want those who sustained a brain injury to know that there are resources available to help get on the path to recovery," said Scott Livingston, Director of Education at the Defense and Veterans Brain Injury Center (DVBIC). ◀

Date Change for Next RCPA Brain Injury Committee Meeting

TAKE NOTE!

The upcoming RCPA Brain Injury Committee meeting, originally scheduled for November 15, 2017, has been **rescheduled to December 6, 2017**. The meeting will take place at its regularly scheduled time (10:00 am – 2:00 pm) and location (RCPA 777 East Park Drive, Harrisburg, PA 17111). A formal meeting invitation will be forthcoming in early November. Questions regarding this change can be sent to [Melissa Dehoff](#). ◀

Physical Disabilities & Aging

Community HealthChoices Eligibility Info Issued by OMHSAS

As the implementation of Community HealthChoices (CHC) approaches the January 1, 2018 launch in the Southwest Region, the Department of Human Services (DHS) has developed informational materials for those individuals who will be covered by the new program. The documents, including notices and the pre-enrollment packet, are posted on the [DHS website](#), where you will also find their most recent participant document, "CHC: Here's What You Need to Know" (available for download in English and Spanish).

In addition, a document designed to clarify eligibility for CHC is [available here](#). It includes the following information:

Individuals are NOT eligible for CHC if they are a person with an intellectual or developmental disability who is eligible for services through the Department of Human Services' Office of Developmental Programs (ODP), OR are a resident in a state-operated nursing facility, including state veterans homes.

Please visit the [CHC website](#) or call the CHC Provider Hotline at 833-735-4417 with any questions. See article under the State News section of this newsletter, "DHS Issues Community HealthChoices Information & Resources," for more details. ◀

Rebalancing: A Key to CHC Success

As Pennsylvania rolls out Community HealthChoices (CHC), Managed Long Term Services and Supports (MLTSS), a number of factors are emerging as being key to success — but none more important than achieving rebalancing of the number of individuals living in the community versus those living in nursing facilities. The Commonwealth established consumers living in the community as the first goal of CHC, which is one of the ways to achieve effectiveness and efficiency from a budget perspective. As MCO's payments are capitated, the generally lower costs of supporting people in the community provides alignment of the community living and financial goals.

The MCOs have demonstrated their commitment to rebalancing in the pre-enrollment package which was distributed to nursing home residents / CHC participants. The incentives being offered range from \$5,000 to \$6,000 for individuals who elect to move from a nursing facility to the community, and the funds may be used to subsidize rent or other services needed to assist in the move to the community.

At the RCPA Conference, Andrea Costello and Brenda Dare from Transitional Paths to Independent Living

(TRPIL) presented "[Making Connections: From the Nursing Home to the Community](#)." The unique approach used by TRPIL uses a diverse team, along with an integrated and systemic delivery system, while maintaining the connection between community based organizations, the consumer, and the community.

Also at the RCPA Conference, Juliet Marsala from Inglis Foundation, Norma Robertson-Dabrowski from Liberty Resources, Inc., and Janet Turner from Inglis House, presented "[Transitioning Into the Community Post-Nursing Home: What it Takes?](#)" They provided insights on the transitions of 29 consumers into the community and the complex coordination required from multi-disciplinary teams and navigation of complex service systems.

In both workshops, the focus on consumer choice as well as the supports needed to make transitioning successful was evident. The move towards rebalancing will require the participation of all of the community based providers in MLTSS. The MCOs have demonstrated their initial financial commitment, and it is incumbent on all the other stakeholders to gain an increased understanding of the role CBOs play, which is essential to making CHC successful. ◀



Lynn Kovich Named Deputy Secretary of OMHSAS

Lynn Kovich will serve as Deputy Secretary for the Office of Mental Health and Substance Abuse Services (OMHSAS). Lynn comes with 26 years of experience in direct services work and administration, in both the nonprofit and government sectors, working with individuals who have developmental disabilities, mental illness, and substance use disorders, as well as those experiencing homelessness. RCPA looks forward to working with Lynn and the OMHSAS team. ◀

Outpatient Redesign Team Activating in Preparation for 2018

The RCPA Outpatient Redesign Work Group has reconvened to prepare for the work ahead with our partners at the Department of Human Services. The work group will ensure that priorities are identified as meetings begin in 2018. If your organization has not been active in this work group and you would like to participate, please contact [Sarah Eyster](#). ◀

The Costs of Living for Medicaid Beneficiaries in Pennsylvania

The [National Council](#) has introduced a new series of state-specific fact sheets for its members, *Reality Check: The Costs of Living for Medicaid Beneficiaries*. These fact sheets were developed as a tool that members can use in their efforts to advocate on behalf of people living with disabling mental illness and substance use disorders, who rely on Medicaid for their health care coverage.

Using the most recent local data from a variety of reliable sources, each state fact sheet illustrates the financial and logistical challenges of accessing health care services. The goal of these fact sheets is to foster a stronger appreciation of what it means to live in poverty in the United States and have serious mental illness and substance use disorders. Each fact sheet uses local data to illustrate how many people live in poverty in the state, who qualifies for Medicaid, the cost-of-living in the state, and how cost-sharing for Medicaid beneficiaries would prevent access to the essential services they need. The fact sheets also provide information about the prevalence of serious mental illness in each state and explain the SSI/SSDI income limits for people with serious mental illness. See the [Pennsylvania fact sheet](#) here. ◀

IDD/Mental Health

Study Highlights Direct Support Professional Workforce Needs

Three associations representing community intellectual disability/autism (ID/A) and behavioral health (BH) services providers released a study today that provided a comprehensive review of the ID/A and BH Direct Support Professional (DSP) workforce, the crisis within the workforce, and means to address the crisis. The study identified the need for investment in this workforce as the most important step state policymakers can take to address the workforce crisis. [See the full press release here](#), which also includes a link to the study being referenced. Contact [Jack Phillips](#), RCPA Director of Government Affairs, with any questions. ◀



Use of ASAM Supports Assistance With the IMD Exclusion

DDAP consulted with other state officials, weighed the options for continuing use of the Pennsylvania Client Placement Criteria (PCPC) tool, and decided that the benefits of using a customized tool no longer exceeded the benefits of using the nationally recognized American Society of Addiction Medicine (ASAM) tool. One important reason for the transition stems from the Centers for Medicare & Medicaid Services (CMS) Medicaid Managed Care Final Rule that was issued last summer, which will limit federal reimbursement for residential treatment of Medicaid recipients to 15 days. In response to that rule, and specifically the provision related to the Institutions for Mental Diseases (IMD) exclusion, Pennsylvania aims to better position ourselves in submitting an 1115 waiver to CMS related to the IMD exclusion. The 1115 waiver application requires the use of the ASAM tool. DDAP is establishing a strategic plan for transitioning from the PCPC to the ASAM and will be gathering input from stakeholders to establish a workable process that moves to the use of the ASAM over time, with the goal of full implementation occurring by July 2018. ◀

Professional Memoir by William White, Extraordinary Leader in the SUD Field

Recovery Rising is the professional memoir of William White, who over the span of five decades evolved through the diverse roles (e.g., “streetworker,” addiction counselor, clinical supervisor, treatment administrator, educator, clinical and organizational consultant, research scientist) to emerge as the addiction field’s preeminent historian and one of its most visionary voices and prolific writers. *Recovery Rising* contains the stories, reflections, and lessons learned within one man’s personal and professional journey. Recounted here are many of the ideas, methods, people, and organizations that shaped the modern history of addiction treatment and recovery. These engaging stories are at times poignant and at times humorous, but always revealing, informative, and inspiring. William White’s peers will find their life’s work affirmed in these pages and a younger generation of addiction professionals and recovery advocates will feel the passing of a torch. ◀

Helpline for Addiction Assistance Continues Path of Significant Growth

Pennsylvanians seeking help for drug and alcohol problems are increasingly turning to the statewide toll-free helpline, a program under the Pennsylvania Department of Drug and Alcohol Programs (DDAP). The toll-free helpline has received more than 15,500 calls since introduced by the Wolf Administration 10 months ago, and is providing personal help to individuals suffering from addiction – and to their families and friends – by directing them to immediate help. “Anyone with a drug or alcohol problem can call our toll-free statewide helpline at 800-662-HELP, to talk to a person and get immediate assistance to enter treatment,” said DDAP Acting Secretary Jennifer Smith. Pennsylvanians with a substance use disorder can find help by making this one phone call as an important first step towards recovery. ◀

DDAP Implements Warm Hand-Off in Emergency Departments

The Department of Drug and Alcohol Programs (DDAP) is implementing a warm hand-off process to help overdose survivors who appear in emergency departments (ED) receive counseling and a doctor’s referral to be transferred directly from the ED to a drug treatment facility. The Department has incorporated contractual changes with the Single County Authorities (SCAs) in its 2015–2020 grant agreement that establishes the overdose survivor as a priority population, and requires each SCA to create a process for direct referral from the ED. ◀



DDAP: Development Continues for Data Needed

The new DDAP data system, Pennsylvania Web Infrastructure for Treatment Services (PA WITS), continues to develop. The initial version of the PA WITS system was implemented two months ahead of schedule for the purposes of collecting Treatment Episode Data Set (TEDS) data since September 1, 2015. Several new fields have been added as of September 25, 2017; however, none of the new fields are mandatory at this time. If providers need help getting the data entered, DDAP has encouraged them to contact their Single County Authority for assistance. Contact the PA WITS service desk with system related issues [via email](#) or phone 571-252-5514. ◀

President Trump Declares Opioid Epidemic a Public Health Emergency

The National Council for Behavioral Health has issued a Statement from Chuck Ingoglia, Senior Vice President, Public Policy and Practice Improvement, on President Trump's Remarks on Combatting Drug Demand and the Opioid Crisis. [View the statement here.](#) ◀

IDD

RCPA Asked to Testify at "Employment First" Hearing

The Pennsylvania House Labor and Industry Committee held a hearing October 18, 2017, in Harrisburg to receive testimony on [House Bill 1641](#), legislation that would make "Employment First" the policy of the Commonwealth of Pennsylvania. RCPA was asked to testify, and RCPA member Will Stennett, Public Policy Director for Wesley Family Services, did the honors. Mr. Stennett Co-Chairs RCPA's Intellectual and Developmental Disabilities Committee, and has over 20 years of experience running vocational, day, and residential services. Stennett's testimony emphasized that RCPA unequivocally supports "Employment First" philosophy and agrees with the goals of HB 1641. At the same time, some improvements to the legislation were suggested. For example, the state should lead by example and a 7% disability hiring target established within the ranks of state government. One way to do this is to create a customized employment job classification within civil service. Another way to exhibit leadership would be for the state to require its contractors to either increase disability hiring or implement a plan to actively recruit, hire, and retain workers with disabilities inside their company. RCPA's testimony also urged lawmakers to recognize that existing vocational service providers are experts in the disability employment arena and should be viewed as a valuable resource as "Employment First" policy is implemented. Finally, the testimony urged members of the committee to recognize that every person with a disability is unique and each person deserves the dignity to have their decisions about their life respected and honored. The prime sponsor of HB 1641 is [Representative Bryan Cutler](#) (R-Lancaster County). Mr. Stennett's full testimony [can be found here.](#) ◀



New ODP "Community Living Waiver" Proposed to Feds

The Office of Developmental Programs (ODP) submitted its new Community Living Waiver to the federal Centers for Medicare and Medicaid Services (CMS) on October 3, 2017. The waiver is new but largely parallels the service definitions included in the existing Person/Family-Directed Supports (P/FDS) Waiver. The key difference is that the Community Living Waiver has a \$70,000 cap compared to the P/FDS cap of \$33,000. ODP circulated the proposed waiver language in August, and after reviewing public comments, made modifications before submitting it to CMS. RCPA submitted comments to ODP on behalf of its members. The complete Community Living Waiver submission, as well as a side-by-side of substantive changes made as a result of public comment, is [available online](#). CMS has 90 days to review the waiver application. ODP anticipates the waiver will be approved and become effective January 1, 2018. ◀

RCPA Represented at 6100 Regulations Meeting

The Office of Developmental Programs (ODP) regulatory reform process continued in October with a meeting being held to discuss changes ODP plans to make to the proposed 6100 regulations. The changes are based on the public comments ODP received almost a year ago. The 6100s, if approved by the Independent Regulatory Review Commission, would replace the existing Chapter 51 regulations. These regulations govern publicly-funded home and community-based services administered by ODP for people with intellectual disabilities and/or autism. The 6100s were developed with input from an ODP work group, first convened in December 2014. After several drafts were reviewed, ODP officially proposed the 6100s in the fall of 2016. RCPA submitted extensive comments based on the review of members from a work group of RCPA's Intellectual and Developmental Disabilities Committee. Since that time, staff within ODP have been going over the public comments and making changes based on those comments. On October 18, 2017, ODP reconvened its original work group. RCPA President and CEO Richard Edley, as well as a handful of RCPA member organizations, were present to discuss the key changes ODP expects to make before publishing final 6100 regulations. Discussions during this meeting raised a number of concerns that still remain and ODP agreed to revisit many of them. ODP still expects the 6100 regulations will be published as final in March 2018, with the bulk of the regulations becoming effective 120 days after publication. ◀

CMS Approves Autism Waiver Amendments

Pennsylvania's Bureau of Autism Services (BAS) submitted an amendment to the federal Centers for Medicare and Medicaid Services (CMS) to revise service definitions in its Adult Autism Waiver (AAW), in order to ensure the waiver was in compliance with the CMS Home and Community-Based Services Rule. This amendment was approved by CMS on September 15, 2017, but the effective date for this amendment is October 31. The actual language of the waiver application can be [found here](#) or requested by [emailing BAS](#). ◀

October Recognized as Disability Employment Month

On October 18, 2017, [House Resolution 544](#), introduced by [State Representative Tom Murt](#) (R-Philadelphia/Montgomery County), passed the Pennsylvania House of Representatives 191-0. The resolution stated that the Pennsylvania House of Representatives recognizes the month of October 2017 as "National Disability Employment Awareness Month" in Pennsylvania. ◀

Children's Services

Transformational Leadership and Children's Services

At this year's Conference, we had the pleasure of hosting a panel discussion on children's services and leadership. The panelists shared their insights and ideas based on their areas of expertise and experience working with children, youth, and families. The open discussion format was moderated and guided using the foundational principles of Transformational Leadership. The goal of the session was to inspire participants to bring about change through innovation across all domains of human services with emphasis on children's services. Sandy Weaver from Penn State University, Jody Levison-Johnson from National Council for Behavioral Health, and Stephanie Wolfe, Independent Consultant, responded to questions and comments about permanency initiatives, change management models, use of data in decision-making, ethics, compliance, and fidelity to best practices. We look forward to hosting a Children's Services panel as an annual event at the RCPA Conference. ◀



Children's Division Work Group Updates

There are currently four very active work groups. The work groups are scheduled to meet monthly, both in person and via conference call.

Children in Congregate Care – Pediatric focus – the primary goal of this group is to develop awareness and educate child serving providers about the children with complex medical issues who reside in ICFs and other congregate care settings. The recommendations generated by this work group will be used to guide DHS' response to transition of these children into family-like settings whenever possible. In collaboration with the Imagine Different Coalition, the work group members are working with each other to employ best practices that will lead to systemic change, which will increase the opportunities for these children to thrive in family settings.

BHRS Work Group – the focus of this group is to create action steps for the review and eventual implementation of the pending Integrated Behavioral Health Services (IBHS) regulations. Most recently, a "fast track" proposal was submitted for consideration to the Children's Bureau.

The proposal is asking the department to address the statewide issue of hiring and retention of behavioral health workers. RCPA is recommending revisions to the current standards outlined in MA Bulletin 01-01-05. The recommendations are aligned with the proposed draft regulations for IBHS. We believe that the immediate acceptance of this proposal will help address the shortage of qualified applicants and prevent the reductions and closures of BHRS programs in PA. The proposal states that persons with an associate's degree, or at least 60 credits towards a bachelor's degree and a minimum of one year experience providing direct mental health care to children and youth, and a person with a current RBT or BCAT certification, are qualified applicants for BHWs. The group is also creating draft language for a position paper on the implementation of IBHS.



PRTF Work Group – this work group of residential treatment facility (RTF) providers are challenged with recent changes made to the application and supervision of the Child Protective Services Law (CPSL). In summary, our providers have been presented with significant changes to how they provide safety to youth who make allegations of staff abuse. Providers are experiencing staff shortages as a natural occurrence in residential care business and the new interpretation of the CPSL is requiring providers to remove staff who are accused of abuse off shifts and out of programs. The mix of hiring and retention issues with the CPSL requirement is causing stressors related to staffing at appropriate levels to meet regulatory standards. The work group has created an outline of specific barriers and solutions for maintaining safe environments in order to deliver the quality of services that children and families are entitled to. The paper will be submitted directly to Deputy Secretary Utz. This group has also agreed to collaborate with the PA Council on Children, Youth and Families to tackle the issues that impact the delivery of RTF services. A major focus of the RCPA work group on this topic has been data and statistical analysis that will be used to guide systemic change and the future development of regulatory standards for RTF services.

School Based Work Group – this work group developed a survey for school administrators. The goal of the survey is to gather information that will be used to inform best practices for implementation of School Based Behavioral Health (SBBH) services. This group is also interested in pursuing future revisions to the Outpatient Regulations that were recently released for comment. The regulations represent some changes and improvements in outpatient service delivery; however, they do not provide the flexibility necessary to serve children, youth, and their families sufficiently in the current program design. The group continues to outline core elements for a successful SBBH program and discuss the implementation of Positive Behavior Intervention Supports (PBIS). The survey will close on October 27, 2017. ◀

Please contact [Robena Spangler](#), RCPA Director, Children's Division, with any questions.



Events subject to change; members will be notified of any developments

November

Wednesday, November 1	10:00 am – 2:00 pm	Northwest Regional Meeting <i>Park Inn by Radisson, Clarion</i> 45 Holiday Inn Road Clarion, PA, 16214
Thursday, November 2	10:00 am – 2:00 pm	Southwest Regional Meeting <i>Pittsburgh Marriott North</i> 100 Cranberry Woods Drive Cranberry Township, PA 16066
Tuesday, November 7	10:00 am – 2:00 pm	Northeast Regional Meeting <i>Commonwealth Health</i> Thomas P. Saxton Building 468 Northampton Street Edwardsville, PA 18704
Wednesday, November 8	10:00 am – 2:00 pm	Southeast Regional Meeting <i>NHS</i> 350 Sentry Parkway Building 640; 2nd Floor Blue Bell, PA 19422
Wednesday, November 8	10:00 am – 3:00 pm	Human Resources Committee Human Resources Compliance Training <i>Penn Grant Centre</i>
Thursday, November 9	10:00 am – 2:00 pm	Central Regional Meeting <i>Penn Grant Centre</i> 777 East Park Drive Harrisburg, PA 17111
Thursday, November 9	10:00 am – 12:30 pm	Outpatient Rehabilitation Committee <i>RCPA Conference Room</i>
Tuesday, November 14	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee <i>Conference Call</i>
Wednesday, November 15	9:00 am – 4:00 pm	ABFT Training – Day 1 <i>Best Western Premier</i> 800 East Park Drive Harrisburg, PA 17111
Tuesday, November 21	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee <i>Conference Call</i>

DECEMBER

Tuesday, December 5	12:00 pm – 1:00 pm EST	IPRC Webinar: Neonatal Abstinence Syndrome: Understanding the Role of the Pediatric Rehabilitation Team
Tuesday, December 5	12:30 pm – 3:30 pm	Drug & Alcohol Committee <i>Penn Grant Centre</i>
Tuesday, December 5	9:00 am – 4:00 pm	ABFT Training – Day 2 <i>Best Western Premier</i> 800 East Park Drive Harrisburg, PA 17111
Wednesday, December 6	9:00 am – 4:00 pm	ABFT Training – Day 3 <i>Best Western Premier</i> 800 East Park Drive Harrisburg, PA 17111
Wednesday, December 6	9:30 am – 12:00 pm 1:00 pm – 4:00 pm 1:00 pm – 4:00 pm	Mental Health Committee Children's Division <i>Penn Grant Centre</i> Criminal Justice Committee <i>RCPA Conference Room</i>
Wednesday, December 6	10:00 am – 2:00 pm	Brain Injury Committee <i>Penn Grant Centre</i>
Thursday, December 7	9:15 am – 11:15 am 12:15 pm – 4:00 pm	Supports Coordination Organization Subcommittee Intellectual/Developmental Disabilities Committee <i>Penn Grant Centre</i>
Tuesday, December 12	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee <i>Conference Call</i>
Wednesday, December 13	10:00 am – 12:00 pm 12:00 pm – 1:00 pm	Open Meeting with Board Lunch with Board <i>Penn Grant Centre</i>
Thursday, December 14	10:00 am – 12:30 pm	Medical Rehabilitation Committee <i>RCPA Conference Room</i>
Tuesday, December 19	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee <i>Conference Call</i>
Wednesday, December 20	1:00 pm – 3:30 pm	Physical Disabilities and Aging Division <i>Penn Grant Centre</i>