



Special Feature



- ► Gov. Wolf's 2020-21 Budget Will Further Protect Vulnerable Populations — based on recommendations from the Council on Reform, of which RCPA President/CEO Richard S. Edley, PhD is a member (See article on page 4 for more details)
- ► New L.A. Times Podcast 'Chasing Cosby' Chronicles The Rise And Fall Of Bill Cosby RCPA Drug & Alcohol Division Director Kristen Houser (formerly of PCAR) is One of the Interviewees
- ▶ NatCon20 Registration Open RCPA Member Discount Code Available
 - NatCon 2020 Summits and Special Events Mental Health First Aid, Young Leaders Program, Whole Health Action Management (WHAM), Middle Management Academy



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©2020. This monthly newsletter is written by the Rehabilitation and Community Providers Association (RCPA) for the health and human services communities. Deadline for publication is the 20th of every month or the Friday before.

The views and opinions expressed in these articles are those of the authors and do not necessarily reflect the official policy or position of RCPA.

Membership

Members in the News

- Clean and Sober: Interview with Mark Schor, Division President for RCPA Member Acadia HealthCare
- ► Institutionalized From Birth, Man Reunites With Family With The Help Of RCPA Member COMHAR
- ▶ Lunch with Mimi: Becky Aungst Leads Skills of Central Pennsylvania





RCPA Membership: Strength in Numbers

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 is a discount for the first year 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. ◀



Government Affairs

Governor Releases 2020/21 Budget Numbers

On February 4, Governor Wolf gave his annual budget address to a joint session of the General Assembly. In the Governor's budget, he calls for increases to health and human service line items; however, some of his requested increases are included in a supplemental appropriations bill, which is a piece of legislation that is separate from the traditional June general budget and budget code bills. RCPA reacted to the Governor's budget proposal by releasing this statement. Additionally, RCPA is working with the Wolf Administration to schedule a specialized budget briefing for RCPA members. Questions, please contact Jack Phillips. \blacktriangleleft

Elected Officials Not Running for Re-Election

Over the past few weeks and months, several elected officials announced that they will not be seeking another term in office. The list is highlighted by the announcement from Speaker Mike Turzai that he will not be running for re-election.

The current list of elected officials who have announced their intention not to seek re-election is as follows:

- Rep. Stephen Barrar (R-Delaware);
- Rep. Thomas Caltagirone (D-Berks);
- Rep. Garth Everett (R-Lycoming);
- Rep. Matt Gabler (R-Clearfield);
- Rep. Neal Goodman (D-Schuylkill);
- Rep. Marcia Hahn (R-Northampton);
- Rep. Mark Keller (R-Perry);
- Rep. Bill Kortz (D-Allegheny);
- Rep. Steve McCarter (D-Montgomery);
- Rep. Thomas Murt (R-Montgomery);
- Rep. Harry Readshaw (D-Allegheny);
- Rep. Justin Simmons (R-Northampton);
- Rep. Mike Tobash (R-Schuylkill);
- Rep. Marcy Toepel (R-Montgomery); and
- Rep. Mike Turzai (R-Allegheny).

RCPA PAC Needs Your Support

The RCPA PAC raises money and supports campaigns of state legislators and representatives who advance our interests on Health & Human Services issues. The funds raised through RCPA PAC can make a difference. 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.

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.

RCPA Legislative Information

RCPA members can now find the most recent documents on legislative priorities, position papers, and other important legislative information on RCPA's website. Please check the RCPA website for additional updates on legislative happenings. ◀

Government Affairs

RCPA's Legislative Tracking Reports

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, which is broken down into specific policy areas. You can review these tracking reports below to see the legislative initiatives that the General Assembly may undertake during the 2019/20 Legislative Session. If you have questions on a specific bill or policy, please contact Jack Phillips, RCPA Director of Government Affairs.

- Adult Mental Health
- Autism
- Brain Injury
- Budget
- Children and Youth
- Children's

- Criminal Justice
- Drug & Alcohol
- Insurance
- ► Intellectual Disabilities
- Labor
- ▶ Medical Rehabilitation

- Minimum Wage
- Miscellaneous
- Regulatory
- Social Programs
- Suicide

Federal News

Proposed Rule Addresses Drug Pricing Issues

On December 23, 2019, the Food and Drug Administration (FDA) within the Department of Health and Human Services (HHS) published a proposed rule to amend its regulations to implement a provision of the Federal Food, Drug, and Cosmetic Act (FD&C Act) to allow the importation of certain prescription drugs from Canada. If this rule is finalized as proposed, states or certain other non-federal governmental entities would be able to submit importation program proposals to the FDA for review and authorization. The imported drugs would be required to be relabeled with US labeling prior to importation and undergo testing to ensure the drugs meet US specifications and standards. Comments on the proposed rule are due by March 7, 2020. ◀

Provider Enrollment Application Fee for 2020

On November 12, 2019, the Centers for Medicare and Medicaid Services (CMS) issued a notice, "Provider Enrollment Application Fee Amount for Calendar Year 2020," in the Federal Register. As of January 2020, the application fee is \$595 for institutional providers that are initially enrolling in the Medicare, Medicaid, or Children's Health Insurance Program (CHIP); revalidating their Medicare, Medicaid, or CHIP enrollment; or adding a new Medicare practice location.



CMS Approves OLTL's Community HealthChoices Waiver Renewal

The Centers for Medicare and Medicaid Services (CMS) has approved the Office of Long-Term Living's (OLTL) Community HealthChoices (CHC) Waiver renewal. The renewal became effective on January 1, 2020.

Key changes in the approved waiver include:

- Revised the Residential Habilitation service definition by modifying the number of hours that are defined as a day unit from a minimum of 12 hours to a minimum of 8 hours.
- ➤ To the service definitions of Job Finding, Job Coaching, Employment Skills Development, Career Assessment and Benefits Counseling, added language that Office of Vocational Rehabilitation (OVR) services are considered to not be available if OVR has not made an eligibility determination within 120 days; and added language to address when employment services through the CHC waiver can be provided should OVR close the order of selection, thereby creating a waiting list for OVR services.
- ► Modified the qualifications for Service Coordinators and Service Coordinator supervisors.
- Clarified that if a CHC Managed Care Organization (MCO) identifies that a participant has not been

receiving services for 5 or more days, and if the suspension of services was not pre-planned, then the CHC-MCO must communicate with the participant to determine the reason for the service suspension within 24 hours. If the participant's health status or needs have changed, the CHC-MCO must conduct a comprehensive needs reassessment of the participant's needs within fourteen (14) days of identifying the issue.

- ► Added that an emergency back-up plan must be included in the Person-Centered Service Plan.
- ➤ Modified language to reflect that the CHC waiver will be fully operational statewide as of January 1, 2020.
- ▶ Updated language to reflect that the Department utilizes IDEMIA as the data system to process fingerprint-based Federal Bureau of Investigation (FBI) criminal record checks.
- ► Updated the OLTL bureau names and responsibilities.

Questions surrounding the CHC Waiver Renewal should be directed to the OLTL Bureau of Policy Development and Communications Management at 717-857-3280. ◀

Community HealthChoices (CHC) Fact Sheet Now Available

Community HealthChoices, Pennsylvania's mandatory managed care program for individuals who are 21 years of age or older and have both Medicare and Medicaid or receive long-term services and supports (LTSS) through Medicaid, is now live across the state. To assist with sharing information about CHC, a fact sheet/Q&A document is available, as well as a 30-minute online training.



Medical Rehabilitation

MIPS 2020 Payment Adjustment Information/Fact Sheet

The Centers for Medicare and Medicaid Services (CMS) has issued a 2020 Merit-based Incentive Payment System (MIPS) payment adjustment fact sheet. The calendar year (CY) 2020 MIPS payment adjustments are applied to payments made for Part B professional services payable under the Physician Fee Schedule. The payment adjustments are determined by providers' 2018 MIPS final scores. This fact sheet provides detailed information about the MIPS, including who will receive the payment adjustment, determining the MIPS payment adjustment, etc. as well as frequently asked questions (FAQs). ◀

Providers Encouraged to Recheck Final 2019 MIPS Eligibility

Following the release of the 2019 Merit-based Incentive Payment System (MIPS) eligibility data in December 2019, the Centers for Medicare and Medicaid Services (CMS) discovered some inconsistencies and have since corrected them. However, providers are being encouraged to use the Quality Payment Program (QPP) Participation Status Tool.

Brain Injury

Service Members With Brain Injuries Have Higher Incidence of Mental Health Disorders

A recent article in Stars and Stripes focused on a study of service members who suffered moderate to severe traumatic brain injuries (TBI) in combat, concluding that they have a significantly higher increase of mental health disorders in the following years, compared to those that sustained other traumatic injuries. The study, published in the journal Military Medicine, included the findings after examining 5,000 cases of TBI from 2002 to 2011. In this study, two groups were compared: one that sustained moderate to severe brain injury and the other that experienced general, critical injury. The findings showed that 71 percent of these patients were diagnosed with at least one of five mental health conditions (anxiety and mood disorders, adjustment reactions, schizophrenia and other psychotic disorders, cognitive disorders, and posttraumatic stress disorder) during multiyear follow-up periods. ◀

BIAA Announces Upcoming Webinars

The Brain Injury Association of America (BIAA) has posted their upcoming live webinars, including:

- ► Functional Outcome Trajectories Following Inpatient Rehabilitation for TBI
- ► Contracting and Payor Relations
- Recreation Therapy Following Brain Injury
- Getting Your Life Back After Brain Injury: Five Ways to Rehab Your Mind and Life
- Managing Emotions After Brain Injury



Physical Disabilities & Aging

Articles and topics selected for this newsletter are designed to help build continued knowledge base among our members for the topics that will impact you most as we move to managed care in Pennsylvania.

CHC Corner

Community HealthChoices (CHC) is now a statewide program as of January 1, 2020. The three participating managed care plans are: UPMC Community HealthChoices, AmeriHealth Caritas Pennsylvania/Keystone First, and PA Health & Wellness. The Department has received approval from the Centers for Medicare and Medicaid (CMS) to renew the CHC waiver effective January 1, 2020, including new provisions that support employment services for participants when the Office of Vocational Rehabilitation (OVR) Order of Selection is closed, or when the wait for services exceeds 120 days. Other changes include the qualifications for service coordinators and the service definition for residential habilitation. The approved waiver is available here. General information about CHC is available here. ◀

Dually Eligible Billing

A key goal of Community HealthChoices (CHC) is improved coordination between Medicare and Medicaid for those Pennsylvanians who are eligible for both programs. These individuals are referred to as 'dually eligible,' or 'duals.' The requirement to coordinate these benefits is now in place for all dually eligible Pennsylvanians. Both programs cover physical health services such as doctors' visits, hospital stays, lab tests, and drugs. Once Medicare - and any of the individual's other health insurance – have paid or denied the claim for services, Medicaid can be billed for the remainder of the claim. This does not change under CHC. What does change is that these claims now go to the participant's CHC managed care organization, not to the PA Department of Human Services. The CHC-MCO must pay participants' Medicare co-insurance or deductible, whether or not the Medicare provider is included in the CHC-MCO's network. Providers cannot bill dually eligible participants for Medicare cost-sharing when Medicare or Medicaid do not cover the entire amount billed for a service delivered. A fact sheet regarding billing and a Provider Hotline is available here.



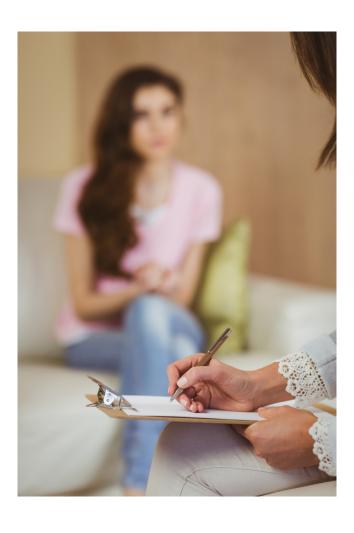
CCAP Names 2020 Priorities, Number One Mental Health County Funding

Counties' number one priority is funding for mental health services. Community-based mental health services – such as community residential programs, family-based support, outpatient care, and crisis intervention - are critical to the well-being of constituents and communities. Ed Bustin, Bradford County Commissioner and member of the County Commissioners Association of Pennsylvania (CCAP) Comprehensive Behavioral Health Task Force, stated, "For too many years, state funding for mental health services has lagged far behind needs. Mental health base funds

for expanded services, beds, and diversions must be increased."

Bustin continued, "There also is a recurring threat to eliminate the successful Behavioral HealthChoices program, which would disrupt care and treatment for tens of thousands of Pennsylvanians, as well as increase the cost of services. For the past 20 years, Behavioral HealthChoices has allowed each county the flexibility to deliver mental health and drug and alcohol services to individuals enrolled in Medicaid. Efforts to dismantle Behavioral HealthChoices must be abandoned."

Governor Wolf has recently called on the state to expand resources and comprehensive support for mental health services, to end the stigma related to mental illness, and to eliminate barriers to ensure that every Pennsylvanian has access to necessary mental health services. Bustin noted, "We need a targeted, strategic investment of dollars into county services to maintain the existing safety net and to bolster the availability of mental health services to those who need them. Without funding, new initiatives will not have the support they need to succeed, much less have the real community impacts we desire – and that our constituents deserve. ◀



CCBHC Demonstration Project Update

The Pennsylvania Department of Human Services (DHS) decided not to continue in the Certified Community Behavioral Health Clinics (CCBHC) demonstration project which had been extended by the federal government. Instead, the Office of Mental Health and Substance Abuse Services (OMHSAS) has created a Pennsylvania-specific program called the Integrated Community Wellness Centers (ICWC). As this program is being defined, it will embrace the values of the CCBHCs, while restructuring the reporting requirements, performance, and outcomes measures for the new program. The ICWCs will be paid, upon CMS approval, on a per member-per month (PMPM) basis beginning later this spring.

RCPA staff's biggest concern is the payment delay for providers, as the PMPM will likely be unavailable until July. Providers are permitted to bill back to January 1 for the core services already being funded, at the negotiated managed care rate, until which time they can retroactively bill back to the start of the program and bill at the PMPM rate in July. \blacktriangleleft

CCBHC Federal Expansion Opportunity Through SAMHSA

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced the availability of \$200 million in Certified Community Behavioral Health Clinic (CCBHC) Expansion Grant funds for FY 2020. Applications are due March 10.

As in prior years, organizations can apply for grants of up to \$2 million per year for 2 years, and they are open to organizations that either are already CCBHCs, or can meet the requirements to become a CCBHC within four months of the date of award.

Two important things to note about eligibility for the grants:

- ▶ The first cohort of Expansion Grantees whose funding is expiring in September 2020 are eligible to re-apply for grants. However, SAMHSA has indicated that grantees funded in the second round are not eligible, since these organizations will be implementing a second year of grant funding at the time of award of this announcement.
- ▶ New this year, the grants are open to organizations in any state; however, priority will be given to organizations in the 24 states that received CCBHC planning grants in 2016. The expansion of the grants nationwide is an important step towards making CCBHCs available across the country. ◀

Pennsylvania Launches 'Reach Out PA: Your Mental Health Matters'

(From the Office of Governor Tom Wolf)

Governor Tom Wolf announced a focused multi-agency effort and anti-stigma campaign, 'Reach Out PA: Your Mental Health Matters,' aimed at expanding resources and the state's comprehensive support of mental health and related health care priorities in Pennsylvania. The governor announced several initiatives and reviews the administration will undertake for commonwealth agencies to bolster the effort. Further, over the coming weeks, agencies will announce additional initiatives...

"For those struggling with their mental health, we have one message: your mental health matters and it's okay to reach out for help," Gov. Wolf said. "We are stepping up our efforts to ensure every Pennsylvanian can access mental health care and more agencies can respond to the challenges facing Pennsylvanians struggling with their mental health. The act of reaching out for help – or to help – can make a huge difference for someone struggling."

According to a 2017 study from the University of Southern California, approximately 1 million adult Pennsylvanians struggled with serious psychological distress at least once in 2015. Of those adults, more than 27 percent had an unmet need for mental health care. That population includes 42 percent who did not receive mental health care because they could not afford it... [read full release here].



Drug & Alcohol

DDAP Issues Updates on ASAM

The PA Department of Drug and Alcohol Programs (DDAP) issued an American Society of Addiction Medicine **(ASAM) January 2020 Update** for the status and latest news regarding application of The ASAM Criteria, 2013.

Highlights include:

As of January 1, 2020, DDAP has added an online option to its approved ASAM Criteria, 2013 trainings. Online modules 1 and 2 offered by The Change Companies or the in-person trainings offered by Train for Change can now satisfy the training requirement. Details about online ASAM Criteria, 2013 training is on the DDAP website.

In-person trainings will be scheduled at the discretion of DDAP and other sponsoring entities or as arranged independently with Train for Change.

Additionally, DDAP and DHS will be aligning service delivery (hours, service descriptions, staff qualifications) to the ASAM Criteria, 2013. They anticipate full alignment with service delivery to be completed by July 1, 2021, and stress that client need should always drive length of stay and not be program driven. ◀

US Government Accountability Office Report: Barriers to Medicaid Beneficiaries' Access to Treatment Medications

The US Government Accountability Office (GAO) issued a report on January 24, 2020, outlining their findings on the barriers Medicaid recipients face when trying to access medications to treat opioid use disorder. Medicaid is one of the largest sources of coverage for people who receive medication assisted treatment. The GAO also identified state policies that may restrict a recipient's ability to access medications, and included recommendations that the Department of Health and Human Services ensures that states comply with federal requirements.

The full report, GAO-20-233, as well as a page noting the highlights of their findings, can be easily accessed and shared from the GAO website.

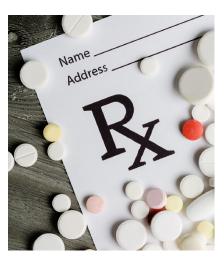
Some of the findings they highlight include:

 Approximately 40% of states may not cover all forms of MAT medications such as injectable or implant formats;

- Some medications or specific formats of medications may require pre-authorization, which can result in life-threatening delays to a patient's access to MAT medication;
- Some states have put mandates in place to govern how MAT medications may be delivered, which may put providers at a significant financial risk; and
- ➤ Some providers are unwilling to obtain the federal waiver required to prescribe or administer buprenorphine due to the required number of training hours. The resultant shortage of physicians may limit access to buprenorphine in some states in two ways: fewer physicians to prescribe, or fewer to supervise nurse practitioners who may have obtained a waiver but for whom supervision by a physician is required. ◀

NPR's Morning Edition Features Role of Family Physicians in Treating Pain, Addictions

Access to specialized care for pain and treatment for substance use disorders can be difficult to find in rural areas of the United States, including parts of the Commonwealth. NPR ran a 6-minute feature on December 30, 2019 on this problem, and the role that family physicians are playing to fill that void in some communities. Listen to the feature and view video footage here.



Drug & Alcohol

DOH Human Trafficking Awareness Month Training Opportunity

Recognizing the close correlations that exist between drug trafficking, human trafficking, and traumatic experiences, such as what happens to people who are trafficked and related substance use disorders, RCPA wants to ensure that drug and alcohol treatment providers are aware of this resource. Human Trafficking is a form of modern slavery in which a person is exploited with force, fraud, or coercion to perform commercial sex acts, labor, or other services. It can affect anyone regardless of gender, race, age, religion, location, or socioeconomic status. Approximately 60 percent of human trafficking victims are seen in emergency departments while they are being trafficked. The Stop, Observe, Ask, and Respond (SOAR) to Human Trafficking Training will help you to identify, treat, and respond appropriately to human trafficking. These trainings are designed specifically for health care, social services, and public health professionals. The Department of Health (DOH) is providing online trainings through TRAIN PA and these courses provide CE/CMEs. Available courses are listed here.

Intellectual/Developmental Disabilities

2019 Direct Support Professional Compensation Study

This is the fourth Direct Support Professional (DSP) compensation survey conducted in Pennsylvania by this seven association collaboration. The primary purpose of the survey is to generate information that could be used to further educate legislators about the challenges that providers face in trying to hire DSPs. It offers a secondary benefit to colleagues in the Human Resources area by providing comparative data on wages, turnover, open positions, and benefits. As the fourth in a series of reports on DSP compensation, the report offers a historical perspective and the opportunity to evaluate systematic efforts to increase wages for Direct Support Professionals. The full study can be found here. Results include data showing that as of June 30, 2019, the average DSP starting hourly wage was \$12.16, with an average DSP hourly wage of \$13.20. Roughly 1 out of 5 DSP jobs remain open, putting strain on the current workforce, while negatively impacting Pennsylvanians with intellectual disability or autism. With DSP turnover at 31.6% per year (over 17,000 positions out of 55,000) and 19.4% of DSP positions open (over 10,000 positions out of 55,000), Pennsylvania still has a long way to go to fix the DSP crisis. ◀

ANCOR Adopts Strategic Direction Plan for 2019–2023

ANCOR's Board of Directors approved the strategic direction recommended by the Executive Committee. Focus for activities will be driven by the following strategic pillars:

- Influence responsible federal public policy to protect and promote quality services;
- Obtain resources to attract, expand, and retain a quality workforce;
- ▶ Be an indispensable resource to equip partners and providers in understanding and responding to impacts, opportunities, emerging practices, and trends; and
- ▶ Shape the future of service delivery models and measures to ensure sustainable services.



Intellectual/Developmental Disabilities

Statewide Provider Partnership Continues Work With OVR Services

On January 13, several agencies who provide Pre-ETS and Supported Employment (SE) Services to individuals in PA met to organize their thoughts and concerns, as well as recommendations to present to the Office of Vocational Rehabilitation (OVR) staff regarding these programs. Key issues that were discussed with Pre-ETS included:

- Foundational concept of "Trainer";
- Administrative duties, including reporting and OVR oversight;
- Rate of service (including cost analysis per provider and location), concept of cash flow, provider risk;
- Processes for service determination, referral, authorization;
- Lack of assessment for students prior to PWEs, etc.;
- Meaningful experiences for students and employers;
- ► Employer relations;
- Report content;
- Communication;
- Consistency;
- Provider training;
- Provider evaluation; and
- OVR and provider capacity.

Additional issues with SE included:

- Complexity of procedures and expected timelines; and
- Maintaining consumer continuity of services and motivation.

In the afternoon, the group was joined by several representatives from OVR, including Shannon Austin, Kim Robinson, Beth Ann Fanning, Doug Rand, and Ralph Roach to discuss these issues. Executive Director Austin and OVR staff were very interested in listening to providers' concerns and expressed a desire to continue working with the group to improve processes. It was a very positive meeting and we are hopeful for continued collaboration with OVR in order to increase employment opportunities for individuals with disabilities. Any provider interested in joining the partnership can contact Carol Ferenz, or Joe Michener. ◀

Quality Assessment and Improvement Updates

ODP Published a Frequently Asked Questions (FAQ) regarding Quality Assessment and Improvement (QA&I) on January 2, 2020. This publication addresses questions regarding Cycle 1, Year 3 (2019–2020). Of particular interest for several of our members is the interpretation of appropriate remedial action for CPS claims provided by staff who may not have completed all of the department approved training on CPS. Some providers had been advised that they must void those claims. The guidance in this document reads as follows:

Remediation action for Q38 and 39 – CPS training/voiding of claims – The current remediation language for Q38 and Q39 states "The Provider voids claims for all staff who did not complete the Department approved training on CPS and Provider staff completes the Department approved training on CPS." How is this standard being applied?

For Cycle 1 only, the following standards apply:

Self-Assessment Review: If the Provider identified a non-compliance to Q38 and/or Q39 during the self-assessment phase, the Provider should immediately take action and have staff trained. No further action will be taken by the AE based on the self-assessment findings, documentation, and remediation of all staff meeting training requirements.

Provider Onsite Review:

- ► Staffing ratio 1:1 if staff is not trained, the provider must void all claims and train staff.
- ▶ Staffing ratio includes more than one direct service professional If there is at least one staff who completed the Department approved CPS training, the Provider will be exempt from voiding the associated CPS claims. In addition, ALL staff who did not complete CPS training, must do so within the required timeframe identified via the CAP process.

For Cycle 2 starting July 1, 2020, Providers will be held accountable for ensuring that all direct service professionals, program specialists, and supervisors of direct service professionals who provide CPS are trained in accordance with waiver requirements. If staff are not trained regardless of staffing ratio, voiding of claims will be enforced.

Guidance in the document includes general process questions; self-inspection questions; SC-specific, Provider-specific, and AE-specific questions; and Quality Management Plan questions. The full document can be accessed here. ◀

Intellectual/Developmental Disabilities

DSP Magnet™ Workshop

Are you sick of the vicious cycle of recruiting, hiring, & turnover?

Want to attract & retain Direct Support Professionals like a magnet?

This workshop is for you.





Recruitment and Retention Workshop Presented by Craig & Scott de Fasselle

We are pleased to offer our members a half-day **DSP MagnetTM Workshop focusing on recruitment strategies and retention for Direct Support Professional positions.** Craig and Scott de Fasselle are the father/son team who presented two webinars for RCPA members on these subjects. Many of our members who participated in the webinars found them to be helpful and thought-provoking. Now is the opportunity to meet them in person and dive into the topics that are so important to attracting and keeping the staff so critical to our work.

The workshop will be offered twice in order to extend the opportunity to more of our members. Attendees will get a mix of group exercises, individual exercises, and presentations all geared to attracting applicants, improved on-boarding and training experience, and building positive agency culture in order to maintain your best employees.

Date: Thursday, April 16, 2020

Time: Session 1, 9:00 am - 12:15 pm • Session 2, 1:00 pm - 4:15 pm

Place: 777 East Park Drive, Harrisburg, PA, 17111

Cost is \$89 for RCPA members. Space is limited, so please register today in order to reserve your place. If space permits at press time, registration will be open to non-members for \$119.

- ► Register for Session 1 (9:00 am 12:15 pm)
- ► Register for Session 2 (1:00 pm 4:15 pm)

See video previews below of what attendees get out of our recruiting and retention workshops:

- ▶ https://vimeo.com/blitzmd/recruiting
- ► https://vimeo.com/blitzmd/retention

Contact RCPA IDD Division Director Carol Ferenz with questions. ◀

Intellectual/Developmental Disabilities

ODP Announcements Since Last RCPA News

- ▶ 19-165 Registration Now Open for Spring 2020 Quality Management (QM) Certification Classes
- ▶ 19-166 Bureau of Supports for Autism and Special Populations (BSASP) Required Program Assessment: Changes to Scales of Independent Behavior Revised (SIB-r) Administration
- ▶ 19-167: ACRE Basic Certification Training for Providers of Employment Services
- ► ODP Provider Agreement and Instructions
- ▶ Provider Agreement Letter
- ▶ 20-001: Modified Medication Administration Training Course Now Available
- ▶ 20-002 Open for Public Comment Proposed Heightened Scrutiny Information for Residential Services
- ▶ Attachment 1 Service Locations Presumed to have Institutional Qualities
- ▶ Attachment 2 Heightened Scrutiny Onsite Tool for Residential Services Locations Provider
- ▶ Attachment 3 Heightened Scrutiny Onsite Tool for Residential Services Locations Individual
- ▶ 20-003 Now Available The Quality Assessment and Improvement (QA&I) Annual Statewide Report for Cycle 1 Year 2 Fiscal Year 18-19
- ▶ 20-003 QAI Annual Statewide Report 18-19 Attachment
- 20-004 Clarifications and Training Requirements for Adult Autism Waiver Employment Services
- ► The ABCs of Augmentative and Alternative Communication (AAC)
- ▶ ACRE Basic Certification Training for Providers of Employment Services Harrisburg
- Camera Use in Residential Settings
- ► Community Health Choices Fact Sheet Medicare/Medicaid Billing



Children's Services

OMHSAS Releases IBHS Code Clarification and MA FFS Rate Schedule

The Office of Mental Health and Substance Abuse Services (OMHSAS) has released a bulletin outlining Intensive Behavioral Health Services (IBHS) code clarification, rates, and MA Fee For Service (FFS) rates.

The bulletin outlines the IBHS overview, including the procedure codes for Individual Services, Applied Behavior Analysis (ABA) Services, and Group Services. In addition to the rate fee schedule is language on prior authorization for services.

OMHSAS cites the following fiscal impact overview: the fiscal impact estimated for Fiscal Year (FY) 2019–20 is \$11.1 million (\$5.3 million in State funds). The estimated fiscal impact for FY 2020–21 is \$38.5 million (\$18.4 million in State funds). The estimated fiscal impact for FY 2021–22 is \$45.8 million (\$21.9 million in State funds).

RCPA recommends you review the rate schedule in accordance with your service delivery continuum as part of your implementation planning. RCPA will be reviewing the bulletin and working with RCPA members, OMHSAS, and the BH-MCOs on the fiscal and operational implementation of the IBHS regulations.

There will be a public comment period, whereby interested persons are invited to submit written comments regarding the changes to the MA Program Fee Schedule to the Department of Human Services, Office of Mental Health and Substance Abuse Services, c/o Deputy Secretary's Office, Attention: Regulations Coordinator, 11th Floor, Commonwealth Towers, 303 Walnut Street, Harrisburg, PA 17120.

Comments may also be emailed. Comments received will be reviewed and considered for any subsequent revisions to the MA Program Fee Schedule. Please forward comments and feedback to RCPA Children's Division Director Jim Sharp as part of your OMHSAS response.

The RCPA IBHS work group will have its regularly scheduled meeting and report out as per process. Please contact Jim Sharp with any questions or feedback. ◀

OCYF Revises Bulletin for Notification Process of Licensing Actions and Incidents

The Office of Children, Youth and Families (OCYF) Notification Protocol for Formal Licensing Actions and Incidents, is currently outlined in Bulletin #00-19-02, released in August 2019. On October 21, 2019, OCYF convened a meeting to bring together representatives from entities covered within the scope of this bulletin, to discuss the intent of the notification protocol, and to develop recommendations for improvements to the process.

A new bulletin will be issued promptly to remove the issuance of a notification regarding removal of staff under an approved plan of supervision. These notifications are no longer being sent. This bulletin will also remove any notifications listed that are duplicative of one another, specifically those that would equate to a citation and issuance of a licensing inspection summary (LIS), as those already trigger a notification.

Pending the implementation of Child Protective Services Law (CPSL) amendments, another bulletin will be issued to include a quarterly report that will be provided to county agencies and dependency and delinquency judges, providing aggregate child abuse and substantiation data for child residential or day treatment facilities, approved foster or pre-adoptive homes, and youth development centers and youth forestry camps. If/when the CPSL is amended to permit the release of specific aggregate data, a new bulletin will be issued that will provide for county agencies and dependency and delinquency judges to receive substantiation information at the conclusion of an investigation, regardless of whether they are the placing county for the child or youth for these same placement settings. \blacktriangleleft

Children's Services

Governor Wolf Announces Creation of Juvenile Justice Task Force

Governor Tom Wolf joined legislative leaders and justices recently to formalize a joint agreement with Pew Charitable Trusts on the creation of a Juvenile Justice Task Force, to assess how the state handles juvenile justice, and to develop a report detailing what should be done to strengthen the system. Task force members will be appointed within 30 days and the report will be delivered by November 30, 2020.

According to Pew, the overarching goal of this new initiative is to develop data-driven policy recommendations through stakeholder consensus with the goals of protecting public safety, ensuring accountability, containing costs, and improving outcomes for youth, families, and communities.

"My Council on Reform identified justice-involved youth as a vulnerable population and said that our juvenile justice system needed significant reform," Governor Wolf said. "But, to create the meaningful change we need our state systems, the courts, and the General Assembly to work toward the same goal. This task force can help us do just that."

RCPA Children's Division Introduces New Residential Services Committee

A new work committee, comprised of Children's Residential Services Providers, has been developed to amplify our presence in the Child Welfare / Juvenile Justice system. The group began in December with a strategic focus on:

- Multi-platform approach to regulatory, fiscal, and program barriers;
- ► Funding structures and implementation of Rate Methodology Task Force (RMTF) recommendations to meet cost of care standards;
- Development of a statewide fiscal task force represented by OCYF, County Juvenile Justice, Children and Youth, and County Commissioners to create equity and understanding for contracting and funding;
- Advocacy strategies for articulated responses to systems issues collectively and by agency; and
- ▶ Developing data measures that position providers for crisis, funding, media, and marketing.

The Institute for Human Resources & Services, Inc., is currently hiring a *Director of Residential Services*. The Director oversees the Residential Program Department, which includes group homes for individuals with intellectual and developmental disabilities, Program Specialists, Scheduling Department, and Direct Care Employees. The ideal candidate will have experience managing and overseeing multiple group homes and working with individuals with ID/DD and mental health diagnoses.

- Master's Degree in Human Services or related field preferred
- Knowledge of 6400 Pennsylvania state regulations
- Up to 5 years of management experience and oversight of a Program Department
- Ability to pass applicable background checks
- Other training and/or certification per state requirements
- Full-time, salaried position between \$55,000 \$65,000/year

The Institute is an EOE. To apply, please send a resume to: sweiss@ihrser.com, fax to 570-288-9112, or mail to 250 Pierce Street, Suite 301, Kingston, PA 18704, Attention: Sheena Weiss.







MARCH				
Tuesday, March 10	10:00 am – 2:00 pm	Children's Steering Committee RCPA Conference Room		
Tuesday, March 10	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee Conference Call		
Tuesday, March 17	10:00 am – 12:30 pm	Med Rehab Committee RCPA Conference Room (small)		
Tuesday, March 17	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee Conference Call		
Wednesday, March 18	9:00 am – 11:30 am	IDD Subcommittee RCPA Conference Room (small)		
Wednesday, March 18	9:15 am – 11:30 am	SCO Subcommittee RCPA Conference Room		
Wednesday, March 18	12:00 pm – 3:00 pm	IDD Committee RCPA Conference Room		
Thursday, March 19	9:00 am – 10:00 am	Government Affairs Committee Conference Call		
Thursday, March 19	9:30 am – 12:30 pm	Physical Disabilities & Aging Division RCPA Conference Room		
Tuesday, March 24	9:00 am – 2:00 pm	RCPA Capitol Day Capitol Rotunda, Harrisburg, PA		