

❖ SPECIAL FEATURE

RCPA Annual Conference 2024: “Embracing Challenges, Empowering Success”

Be sure to mark your calendars — September 24 to 27, 2024, we will be back at the Hershey Lodge for a week filled with thought provoking speakers, networking events, interaction with vendors to help providers be efficient and effective, and a chance to enjoy Hershey’s chocolate!



We already have some inspirational keynote and plenary speakers set to present, including DHS Secretary Valerie Arkoosh, Lee Yaiva from Scottsdale Recovery Center, and [Craig Dietz](#), who will share his extraordinary life story of resiliency. Additionally, Amy Thurston from [Hope, Inspire, Love](#) will be speaking about

human trafficking. A request for proposals for workshops has been issued with a deadline of March 11. Our [Exhibitor, Sponsor, and Advertiser brochure](#) is also available for those who would like to support our event and be recognized. Please contact [Carol Ferenz](#), RCPA Conference Coordinator, with any questions. ◀

RCPA Selected for “Partner of the Quarter” by Relias

Relias is excited to announce their first Partner of the Quarter for 2024, Rehabilitation and Community Providers Association (RCPA). Each quarter, the Partner of the Quarter program spotlights one of their valued partners that is engaging and collaborating on marketing activities with Relias, and gives the partner added visibility throughout the Relias ecosystem. RCPA is a proud Gold Relias partner, and we are excited to continue our partnership in 2024.

“Relias has become an indispensable asset to our members. They provide timely, efficient, and quality training curriculums and platforms that enable members to comply with regulatory standards, and with both payor and state licensing requirements. With the workforce crisis and organizations maximizing staffing resources, Relias reduces administrative activities and streamlines the training process, offering convenient access to trainings, to maximize effective use of staff time. In today’s landscape, agencies cannot afford to NOT be part of the Relias team.”

Partner of the Quarter

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PROVIDERS ASSOCIATION

– Jim Sharp, RCPA Director, Mental Health Services, BH Division

About RCPA:

With close to 400 members, the majority of who serve over one million Pennsylvanians annually, Rehabilitation and Community Providers Association (RCPA) is among the largest and most diverse state health and human services trade associations in the nation. RCPA advocates for those in need, works to advance effective state and federal public policies, serves as a forum for the exchange of information and experience, and provides professional support to members. RCPA provider members offer mental health, substance use disorder, intellectual and developmental disabilities, children's, brain injury, criminal and juvenile justice, medical and pediatric rehabilitation, and physical disabilities and aging services, across all settings and levels of care.

Contact **Tieanna Lloyd**, Membership Services Manager, with inquiries or updates regarding the following:

- **Membership Benefits**
- **Your Staffing Updates** (i.e., new hires, promotions, retirements)

Take full advantage of your RCPA membership by signing up for [complete website access](#).



STAFF

Richard S. Edley, PhD
President and CEO

Cathy Barrick
IDD Policy Analyst

Allison Brognia
Event Planner/ Accounts Payable Manager

Melissa Dehoff
Director, Rehabilitation Services Divisions

Carol Ferenz
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Accounts Receivable/Membership Services Manager

Tina Miletic
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Sharon Militello
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Hayley Myer
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Fady Sahhar
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Jim Sharp, MS
Director, Mental Health Services, BH Division

Jason Snyder
Director, Substance Use Disorder Treatment Services, BH Division

Christine Tartaglione
Administrative & Accounting Assistant

Naomi Wallerson
Behavioral Health Policy Analyst



NEW MEMBER INFORMATION

March 2024

BUSINESS

ADP

1301 Virginia Dr
Fort Washington, PA 19034
Brett Ruina, District Manager

Sheppard Pratt Solutions

6501 N Charles St
Baltimore, MD 21204
Jason Melegari, Clinical Services
Director

ZMark Health

100 Daisy Ln
Palmyra, PA 17078
Ashlee Seaman, Managing Director

IPRC

Dell Children's Medical Center
Pediatric Neurosciences – Pediatric
Rehabilitation Center
4910 Mueller Blvd, Ste 300
Austin, TX 78723
Regina Sorkin, Pediatric Rehabilitation
Clinical Program RN Coordinator

PROVIDER

Center for Families and Relationships
7901 Bustleton Ave, Ste 300
Philadelphia, PA 19152
Jordan Brogan, CEO

Glade Run Lutheran Services

30 Glade Run Dr
Zelienople, PA 16063
Steven Green, CEO

RCPA PARTNERS

Be Sure to Visit our [RCPA Partners Page](#)

RCPA is proud to have the following organizations as RCPA Partners:

- [Brown & Brown of the Lehigh Valley](#)
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- [Embolden WC Trust](#)
- [First Nonprofit](#)
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MEMBER CONTRIBUTOR CORNER

More Face Time, Less Waste Time: How Gaudenzia Transformed the Care Experience with Eleos Scribe

By: Brooke Andrus, Senior Content Marketing Manager, Eleos Health

Like many behavioral health providers, Stacy Massey — a counselor at [Gaudenzia](#) — wasn't sold on AI technology out of the gate.

"I'll be completely honest—when I first started with Eleos Scribe, I was a little resistant," she said during a [recent webinar with Eleos Health](#).

The reason for her hesitation? That the presence of an [AI documentation tool](#) would negatively affect her clients' therapy experience. "My biggest concern was making sure that my clients were comfortable—that they felt safe, and that the quality of interactions that I was having

with them was not being impeded by the introduction of Scribe," she continued.

What Massey found is that most clients were open to having [Eleos Scribe](#) present during their sessions — and that it ultimately enhanced the quality of their conversations, because she was able to be more present, knowing that Scribe would [automatically handle](#) the majority of required documentation. "I did start using the product, and what I can tell you is that it's really tremendous," she continued. "I use it every day, [and] my interaction with my clients hasn't changed at all." [\[read full article\]](#). ◀

MEMBERS IN THE NEWS

NTG 2024 Family Webinar Series

The National Task Group on Intellectual Disabilities and Dementia Practices (NTG) is hosting a free webinar series about aging, dementia, and adults with intellectual disability designed especially for families/caregivers. See [flyer](#) for details and registration information.*

**Nancy Murray, of RCPA member Achieva, is an NTG Board Member and participates on the NTG Family Support Committee. ◀*

Success Rehabilitation, Inc. Announces Acquisition of Prominent Brain Injury Rehabilitation Provider, Acadia, Inc.

Quakertown, PA – November 10, 2023 — Success Rehabilitation, Inc., a leading post-acute brain injury rehabilitation provider, is delighted to announce its strategic acquisition of Acadia, Inc., a distinguished post-acute brain injury rehabilitation provider located in Lancaster, Pennsylvania. Starting from January 2024, Acadia, Inc. has been rebranded as: Acadia NeuroRehab – A Division of Success Rehabilitation [\[read full release\]](#). ◀

DIVERSITY

Psychological Safety – Another Way to Conceptualize Inclusion

In this highly polarized point in United States history, it is productive to think outside the box when it comes to presenting diversity, equity, and inclusion efforts and concepts. These very terms have become inflammatory in some circles and may elicit a strong emotional response from individuals. The merit of DEI ideas can become pre-judged when linked with perceived political or social agendas.

This article explores the concept of “Psychological Safety” and strategies leaders can employ to facilitate the comfort, participation, and safety of their employees. What is the end goal of psychological safety? Belonging. Acceptance.

Inclusion. Read the article here: [Safety’s Evolution Towards Psychological Safety Programming](#). ◀

TELEHEALTH

RCPA Pursues Telehealth Legislation

In response to recent developments on the telehealth front in Pennsylvania, RCPA has joined with the State, the PA General Assembly, and stakeholders to address the pathways to expanded telehealth access for practitioners and clients.

These efforts have included the creation of draft legislation to permit the delivery outside the outpatient clinic out in the community. Additionally, it is our intent that any new telehealth legislation will amend Act 76, and the Psychiatric Outpatient Regulatory requirements for the 50% in-office time for clinics, and the use of advanced practice professionals to aid in meeting those time requirements.

In the interim, RCPA continues its dialogue with OMHSAS for guidance and clarification, including sharing members’ and stakeholders’ feedback. We thank members for your continued patience as this progresses. ◀



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. For your convenience, RCPA has created a [legislative tracking report](#), containing the bills and resolutions we are currently following. You can review this tracking report to see the legislative initiatives that the PA General Assembly may undertake during the current Legislative Session. If you have questions on a specific bill or policy, please contact [Jack Phillips](#), Director of Government Affairs. ◀



BEHAVIORAL HEALTH SUBSTANCE USE DISORDER TREATMENT SERVICES

Potential Unintended Consequences of Legalization of Recreational Marijuana: Increase in Adolescent Suicides

As Pennsylvania pushes to legalize recreational marijuana, recent research suggests doing so could have harmful effects for adolescents, including a potential increase in suicide.

The study, "[Cannabis use disorder, suicide attempts, and self-harm among adolescents: A national inpatient study across the United States](#)," examined the association between cannabis use disorder (CUD) and suicide/self-harm in a large, nationally representative sample of hospitalized adolescents. It found that adolescents with CUD were 40 percent more likely to experience a suicide attempt or self-harm.

Although the inpatient study does not directly tie an increase in adolescent suicide to legalization of recreational marijuana, there is an [association between marijuana legalization and the increased risk of cannabis use disorder](#) among adolescents. As more adolescents experience CUD, then, the potential for more suicides also increases [\[read full article\]](#). ◀

BEHAVIORAL HEALTH | MENTAL HEALTH

Crisis Services Coming into Focus

The Vital Role of Peer Support Specialists During a Mobile Crisis Visit

In times of crisis, the need for immediate and comprehensive behavioral health support is paramount. Mobile crisis visits play a crucial role in addressing urgent situations, and the integration of certified peer support specialists during these visits is proving to be a transformative approach.

Certified peer support specialists bring a unique skill set with lived experience to support their work, which

builds client rapport and trust. This contributes to filling the behavioral health therapy gap during mobile crisis interventions, giving a client the tools they need to continue care, and providing a road map that supports the recovery journey.

BHL has compiled a list of six reasons why certified peer support specialists should always be integrated as part of your mobile crisis team [\[read full article\]](#). ◀

PA State Blueprint Work Group For Complex Care – Project Recommendations



The Pennsylvania Department of Human Services (DHS) today released [recommendations from its Blueprint Work Group](#), an interdisciplinary group comprised of representation from state and local governments, health care, education, service providers, managed care, and family advocates. The work group sought to evaluate challenges experienced by children and youth with complex, co-occurring physical and behavioral health care needs and their families, like accessing care and services that adapt to a youth's changing circumstances and needs, lessening the likelihood of child welfare system involvement, reducing trauma experienced by instability, prioritizing emotional wellbeing, and supporting family- and youth-driven care and choice.

The Blueprint group was tasked with addressing the barriers to care that have been created over the past decade with the reduction efforts both nationally and in-state, to reduce the footprint of congregate care. These efforts, coupled with

the impacts of flat funding and workforce challenges, have created a chasm in this continuum of care, both from a residential and community-based services access perspective. RCPA continues its efforts on behalf of members through our work on the statewide committees, with the hope that the implementation values of the project begin to create solutions to this cross-system nexus. ◀

INTELLECTUAL/DEVELOPMENTAL DISABILITIES

IDD Services: Meeting Managed Care Head On to Avoid Past Mistakes

Author: Terence Blackwell Jr., L-BCBA, SAS
In partnership with Core Solutions

Last summer, I presented at a national health-related conference. The topic was originally supposed to be on the future of managed care in the intellectual and developmental disabilities (IDD) field, but where it landed surprised me. In preparation for the presentation, I interviewed several prominent leaders in the field of IDD and autism spectrum disorder (ASD) on what they thought would be the impact of managed care. After those interviews, it became apparent the future for IDD will likely not be defined exclusively by managed care. While agreeing that managed care will lead to huge changes,

there are other factors to consider. I now expect the possibility of increasing pressures to return to large-scale medical model institutions.

To even consider this as possible is alarming, given the tragic history of such IDD care including the Willowbrook travesty. Why do I think we could once again see institutions like Willowbrook? There are three predominant reasons I focused on during my presentation [\[read full article\]](#). ◀

❖ BRAIN INJURY

New Toolkit Designed to Support Individuals With Acquired Brain Injury

Annually, approximately 1.5 million Americans sustain a brain injury, and an estimated 5.3 million Americans are living with the effects of one. While the incidence of brain injuries in the general population is alarming, the prevalence among justice-involved individuals is even more alarming. So alarming that the Centers for Disease Control and Prevention (CDC) recognizes brain injury in prisons and jails as an important public health problem.

All Rise's Justice for Vets has partnered with the National Association of State Head Injury Administrators (NASHIA) to develop a new [toolkit](#) designed to help treatment courts better identify, assess, treat, and support individuals with acquired brain injury (ABI) in their programs. This toolkit, "A Treatment Court Toolkit for Supporting Individuals With Acquired Brain Injury," is free of charge and contains the following:

- ▶ Background on research into current best practices related to brain injury;
- ▶ Overview of brain injury and why it's important in the context of treatment courts;
- ▶ How to screen for a lifetime history of head trauma and current head trauma-related challenge;
- ▶ Making accommodations for brain injury; and
- ▶ Brain injury referrals for evidence-based care. ◀

Overview of Person-Centered Service Planning in HCBS: Requirements & Best Practices

In January 2024, the Division of Long-Term Services and Supports (LTSS) Medicaid Benefits and Health Programs Group Centers for Medicaid and CHIP Services conducted a webinar that provided an overview of Person-Centered Service Planning in Home and Community-based Services (HCBS): Requirements and Best Practices. To review the objectives from the webinar and presentation itself, [use this link](#). ◀

❖ MEDICAL REHAB

CMS Issues RFI on Medicare Advantage Data

On January 30, 2024, the Centers for Medicare & Medicaid Services (CMS) [published](#) a data request for information (RFI) in the Federal Register to solicit feedback from the public on how best to enhance Medicare Advantage (MA) data capabilities and increase public transparency. CMS encourages feedback from a wide array of interested parties, including beneficiaries and beneficiary advocates, plans, providers, community-based organizations, researchers, employers and unions, and all other interested parties, including the public at large. Comments on the RFI will be accepted through May 29, 2024. ◀

IRF-PAI Manual Version 4.2 Published

The Centers for Medicare & Medicaid Services (CMS) is publishing the Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI) Manual, Version 4.2, effective October 1, 2024. A change table outlining the revisions to the manual has also been published. The new manual and change tables can be found in the "[downloads](#)" section of [this web page](#). ◀



Community HealthChoices Request for Application Highlights

On January 30, OLTL released the RFA to procure Community HealthChoices effective January 1, 2025. Responses are due by March 15, 2024. In addition to the three current MCOs, the following MCOs attended the pre-bid conference: Aetna, Jefferson Health Partners, Highmark Wholecare, and Geisinger.

Most of the current regulatory framework would remain in place; however, there are some significant changes that could impact the future of the programs:

- ▶ Introduces Independent Review Organization – ins. dept. grievances, while expanding definition of grievances
- ▶ Introduces In Lieu of Services – highlights assisted living facilities
- ▶ Focus on Consumer-Directed Services:
 - ▶ Discuss this as a FIRST option and document why participant rejected it
 - ▶ Silent on multiple providers of traditional consumer-directed services and fiscal management services (FMS)
 - ▶ Incorporates Agency with Choice; explicit about single statewide provider
- ▶ Service Delivery Innovations Identified:
 - ▶ Housing with focus on rent mitigation and new housing alternatives, including assisted living facilities
 - ▶ Employment with ultimate focus on competitive integrated employment
 - ▶ Workforce Innovation – focus on self-direction
 - ▶ Technology – including the use of smart home and remote patient monitoring
 - ▶ Health Information Exchange (hospital and ER admissions and discharge)
- ▶ Transfers between plans and re-assessment. Participants can still switch health plans every month; however, the new plan can treat the transfer as an event, which allows them to conduct an assessment and update the person-centered service plan prior to the one year anniversary of the assessment. This seems to address the concern that participants were switching plans whenever a reduction in services was recommended.
- ▶ Participant must sign an attestation on voluntary service reductions.

- ▶ Significant Addition: How the service coordinator will address and remove barriers to compliance with the physical or behavioral health treatment plans.
- ▶ Neither CHC-MCOs nor providers can limit the locations for EVV if the locations are allowable by the program.
- ▶ **CHC-MCOs are not required to contract with all willing providers (excluding any willing pharmacy requirements) but must accept and respond to letters of interest from any provider interested in joining the MCO's network.**
- ▶ Value-Based Payments
 - ▶ Recognizes role in network management
 - ▶ Encourages ACO and bundled payments
- ▶ Risk Adjustment – recognizing the level of acuity of participants
- ▶ Enrollment Mix Adjustment
- ▶ Provide standardized core training that includes the following required hours and elements which shall be offered as 8 hours of training within the first 4 months of hire.

[Use this link](#) to view the RFA. ◀



PHYSICAL DISABILITIES & AGING

Governor Shapiro Proposed Budget Highlights / Impact on PD&A Services

The proposed budget allocates over \$450 million in additional spending to Community HealthChoices; however, none of these are intended as rate increases for services, but focus on the increase in the number of participants.

Introduces a requirement for rate review / refresh for personal assistance services. RCPA, in partnership with the Coalition for Choice, is advocating for the rate refresh to be applied to all services – see article below.

- ▶ A reduction in the funding of the OBRA and ACT 150 waivers due to a decline in participants
- ▶ Over \$31 million for additional MCO funding
- ▶ No additional staff designated for OLTL of the 10 additional DHS positions
- ▶ \$11.7 million for Aging Master Plan, now the Aging Our Way plan ◀

RCPA Joins Coalition for Choice in Advocating for Rate Refresh Legislation

The Coalition for Choice was originally formed to increase the consumer choice of providers in consumer-directed services. The Coalition now has active engagement with the Pennsylvania Homecare Association (PHA), the Pennsylvania Providers of HCBS (PA-HCBS), the Adult Day Programs Association (PADSA), the Association of Durable Medical Equipment Providers (PAMS), and the association of Centers for Independent Living (PCIL). The broader membership of the coalition allows the group to address the needs of the services covered by CHC and other waivers.

As the governor's proposed budget addresses rate refresh legislation for personal assistance services only, the coalition is now advocating for all the OLTL approved services to be included, with particular emphasis on brain injury and employment services, well represented in the RCPA membership. The advocacy includes information sharing with legislators and DHS to expand the scope of the proposed legislation. ◀

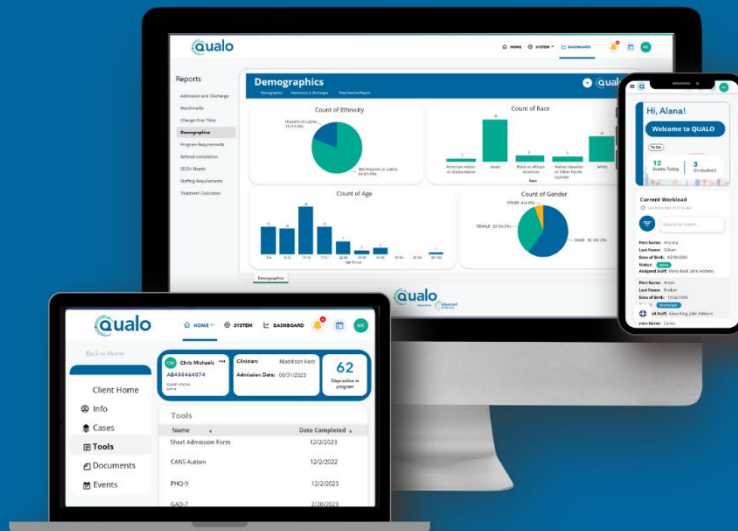


RCPA Events Calendar

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



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Scan the QR code or visit www.calendly.com/consultingfhs to schedule a 30-minute meeting with our team. We'll discuss your needs and learn more about how we can help you start off stronger and more confident in 2024.

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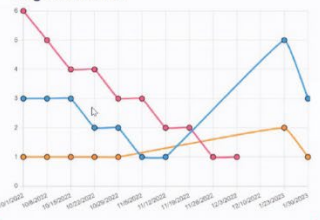
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A Frontline Story on Adopting Augmented Intelligence for Behavioral Health



Andrew Schmitt, LCSW, Director of Outpatient Services and Stacy Massey, Counselor, both of Gaudenzia Inc. share real-world stories on what it's like to navigate organizational and technological transformation in behavioral health

[Watch Now](#)



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For inquiries related to the Hearten program, please contact:



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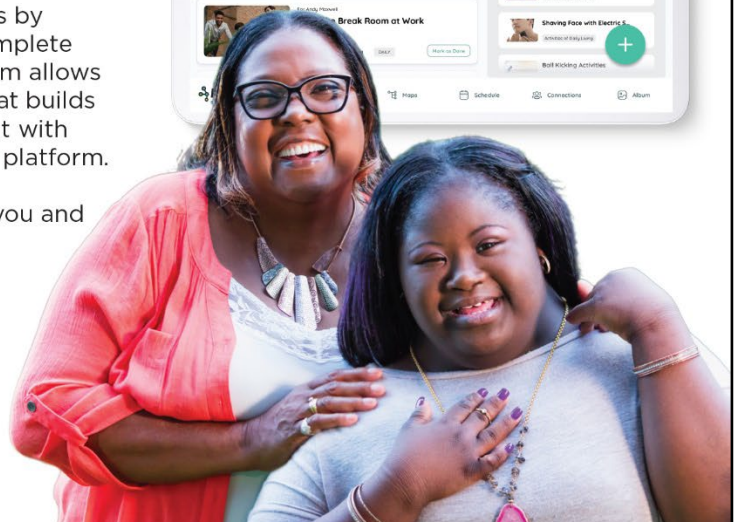
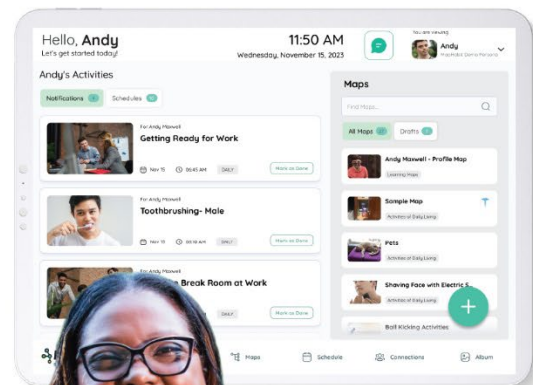
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