



## Pennsylvania Community Providers Association *Provider News Online*

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**A conservative is a liberal  
who's been mugged, and  
a liberal is a conservative  
who's been indicted.**

—  
Unknown

PCPA  
*news*

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### GRI© Applications Available

Applications for the 1999/00 class of PCPA's Government Relations Institute (GRI©) were mailed in early June and are due back to the PCPA office by July 15. The award-winning public policy training program is aimed at mid- to upper-level staff, and a limited number of non-PCPA members will be accepted. The proposed schedule for GRI2000 is:

9/20 – 9/22	Kick-off dinner, introduction to lobbying, nonprofit issues, electoral politics, voter registration, PA budget process, analyzing a bill
10/5 – 10/8	PCPA conference workshops
11/8 – 11/9	County issues, coalition building, grassroots politics
1/10 – 1/11	Working with the media, research, lobbying 201, regulatory process
2/22 – 2/23	In-depth analysis of state's 2000-01 budget
April – TBD	Lobby day in Harrisburg
5/16 – 5/17	Graduation

For additional applications or further information, contact [Lu Conser](#) at the Association office.

## Auberle Receives COA Accreditation

Auberle, McKeesport, PA, has received notification from the Council on Accreditation of Services for Families and Children, Inc. (COA) that it has been accredited. Accreditation attests that an organization is meeting the highest national standards and provides assurance that the organization is performing services which the community needs, conducting its operations safely and effectively, and managing its funds wisely. PCPA congratulates Executive Director Lynn M. Knezevich and the staff of Auberle on receipt of accreditation.

## 1999 Spring Training Hits a Home Run

The **1999 Spring Training: Join the Team**, held at the Harrisburg Hilton and Towers on June 15 – 16 was an out-of-the-ballpark success. Over 100 attendees were treated to a day and a half of hard work and fun. June 15 began with a national perspective on Forensics, Dual Diagnosis, and Accreditation followed by a picnic and ball game at Riverside Stadium, home of the Harrisburg Senators. The next day included three tracks covering Forensics, Dual Diagnosis, and Accreditation, with numerous presenters from around the state giving attendees the latest information about each of these topics. The Harrisburg Senators manager, Doug Sisson, spoke during the luncheon about team building and pulling different systems together. Special thanks to all the presenters who shared their knowledge with others in the field.

## MATP Meets PCPA

A special meeting was held on June 4 in an effort to resolve numerous problems that have been experienced in the Medical Assistance Transportation Program (MATP). Participants included officials from MATP, mental health, drug and alcohol, and mental retardation treatment providers, transportation providers, and PCPA staff.

Issues identified included: time constraints and scheduling problems, limited funds, no shows, prioritization policies, training needs, and managed care. In addition, the group also discussed the issue of entitlement and difficulties in rural communities. Treatment and transportation providers expressed significant concern about the lack of adequate funding to cover the transportation needs of consumers. Transportation providers discussed the

difficulty in making decisions about services with the limited funds available. Children's issues were also discussed and special training for transportation providers was recommended.

MATP officials recommended that if a transportation provider could not meet the needs of the consumer that the treatment provider should contact the County Assistance Office for help. PCPA staff will meet with the Executive Director, Pennsylvania Public Transportation Association to discuss ways to work together to resolve these problems. The group will meet again on June 29 to discuss issues and potential solutions.

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## McBee Associates

# Compliance Programs: Ongoing Monitoring and Disclosures

One of the key elements of an effective compliance program is ongoing internal audits. However, with this process comes a degree of risk. When non-compliant behavior is uncovered the following steps are recommended:

1. Conduct an assessment to determine if a problem exists, and the extent of the problem.
2. If a problem exists contact your attorney. Subsequent findings can be protected by attorney/client privilege.
3. Management should engage counsel in the form of written authorization to investigate the uncovered compliance issue.
4. Maintain all materials from the investigation in a separate file.
5. Counsel should engage and direct the actions of the auditor, or consultants, investigating the problem.

The decision to voluntarily disclose a provider's errors must be made on a case-by-case basis and involve legal counsel. For more information contact Steve Kohler, Supervisor, or Paul Staloni, Regional Manager, at 717-540-9480.

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DIRECTOR'S  
*viewpoint*

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## Double Trouble/ Twice the Need

*...we must  
either be*

So many recent occurrences have called our attention to the need to develop more and better

***part of the  
solution or  
we will be  
part of the  
problem.***

community-based programs for persons dually diagnosed with mental illness and substance abuse (MISA).

There is more and more research, including some excellent studies from the Western Psychiatric Institute and Clinic at the University of Pittsburgh Medical Center, that demonstrates MISA clients are more prone to violent behavior than those who have either mental illness or addiction alone.

Although the above noted research caught my attention, a more recent experience prompted this article. Last week former Attorney General Ernie Preate was the keynote speaker at our PCPA Spring Training program. Preate noted that upwards of 90 percent of our prison population has had problems with alcohol and other drug abuse. Pennsylvania's Department of Corrections cites data revealing that significant numbers of inmates have severe mental illness. A recent article entitled *Dual Diagnosis: Issues in the Treatment of Comorbid Mental Health and Substance Abuse Disorders* by Doctors Jeffrey Pincus and John Ramirez notes that "comorbidity rates vary between 40 and 80 percent for addictive disorders for persons in psychiatric settings." These authors also point out that the "comorbidity of mental disorders among those with addictive disorders has been reported to be between 35 and 50 percent."

The issue for community-based providers is our willingness and capability to successfully serve these individuals. Although a great deal of effort is going on at the state level to coordinate and, hopefully, integrate mental health and substance abuse funding, true service integration can and should occur at the community level. This state effort is clearly reflected in an excellent report (May 1999) by the MISA Consortium, a group assembled by our Office of Mental Health and Substance Abuse Services and the Bureau of Drug and Alcohol Programs. Agencies that have not served dually diagnosed persons need to give this population group serious consideration. Those agencies willing to either expand existing services or create new programs will find great receptivity from county and state officials. Either we step up to the challenge or others will. More importantly, we must either be part of the solution or we will be part of the problem.

Raymond R. Webb, Jr., LSW  
Executive Director

*This article represents my opinion, not necessarily the opinion of the Association.*

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NATIONAL  
*news*

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## Supreme Court Upholds Right to Integration

On June 22 the Supreme Court issued its decision in *Olmstead v. L.C.*, holding that the unnecessary segregation of individuals with disabilities may constitute discrimination. The opinion is available at <http://supct.law.cornell.edu/supct/html/98-536.ZS.html>.

In a 6–3 opinion authored by Justice Ginsburg, the court affirmed that unjustified isolation of individuals with disabilities is properly regarded as discrimination based on disability. The court held that unjustified segregation in institutions is discrimination not only because it perpetuates unwarranted assumptions that people with disabilities are incapable or unworthy of participating in community life, but also because confinement in an institution severely curtails everyday life activities such as family relations, social contacts, work, education advancement, and cultural enrichment.

Nonetheless, the Supreme Court held, the states' need to maintain a range of facilities for the care and treatment of individuals with diverse mental disabilities must be recognized. Additionally, the court held that if the state demonstrates that it has a "comprehensive, effectively working plan for placing qualified persons with mental disabilities in less restrictive settings, and a waiting list that move[s] at a reasonable pace" an individual cannot skip to the top of the waiting list by filing a lawsuit to obtain community services. Finally, the court held that a state may generally rely on "the reasonable assessments of its own professional" in determining whether an individual meets the essential eligibility requirements for a community-based program.

## Psychiatrists File Suit Against Green Spring and Highmark

The Pennsylvania Psychiatric Society, concerned that corporate policies and procedures are affecting mental health treatment, filed suit against Green Spring Health Services and Highmark, Inc. on May 21. Also named in the suit are Magellan Health Services (Green Spring's parent corporation), Keystone Health Plan West, Keystone Health Plan Central, and Keystone Health Plan East.

The suit was filed in the Allegheny County Court of Common Pleas and cites denials of medically necessary care, misrepresentation by Green Spring and Highmark of the type and quality of services for subscribers, and bureaucratic obstacles to obtaining appropriate treatment. Persons who are

aware of similar actions by Green Spring or Highmark are asked to contact [Ray Webb](#) or [Lu Conser](#) at the PCPA office.

## JCAHO Establishes Complaint Hotline

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) has established a toll-free hotline to encourage patients, their families, caregivers, and others to share concerns regarding quality of care issues at accredited healthcare organizations. Commonly raised concerns and complaints are those involving patients' rights, patient care, safety, staffing, infection control, medication use, and security. The Joint Commission recommends that those with quality of care concerns first consult their healthcare organization's leaders before calling the hotline. The JCAHO hotline will be staffed between 8:30 a.m. – 5:00 p.m. Central Time, Monday – Friday.

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### COMMITTEE *reports*

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No reports this month.

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### LEGISLATIVE *updates*

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For additional information on legislative issues, e-mail [Lu Conser](#) or call her at the PA Community Providers Association office (717-657-7078). For copies of bills, call your local legislator, the House Document Room (717-787-5320), or visit the General Assembly's Electronic Bill Room at [www.legis.state.pa.us](http://www.legis.state.pa.us).

## Federal House Juvenile Bills—A Concise Review

Following Senate passage in May of S 254, the House of Representatives is considering similar legislation. Representative Hyde (R-IL) was scheduling HR 1501—Consequences for Juvenile Offenders Act—for floor debate. HR 1150—the Juvenile Crime Control and Delinquency Prevention Act—also awaits action.

HR 1150, sponsored by Rep. Greenwood (R-PA), would funnel \$450 million/year to states through a Juvenile Delinquency Block Grant fund. It includes an amendment stating that the fund can be used for assessment of juveniles who may be in need of mental health services, as well as for the

treatment of incarcerated youth. HR 1150 also requires states to submit a plan for providing mental health services to juvenile offenders as a condition of receiving funds.

HR 1501 contains a provision to amend the existing Juvenile Accountability Incentive Block Grant program to include mental health screening and treatment of juvenile offenders as an allowable use of grant funds.

## Wellstone Proposes Amendments to S 254

In May, the Senate passed the Violent and Repeat Offender Accountability and Rehabilitation Act of 1999. Senator Wellstone (D-MN) wrote amendments included in the bill. The first allows states to use funds from the newly created Juvenile Delinquency Prevention Challenge Block Grant for mental health services for youths, including assessment by a qualified mental health professional, individualized treatment plans for incarcerated juveniles, and mental health aftercare for incarcerated youths.

The second amendment allows states to use Juvenile Accountability Incentive Block Grant funds to train juvenile justice personnel in mental health. The third would create a Coordinated Juvenile Service Grants program, offering grants to states to form consortia addressing the coordination of services to youths with behavioral health needs in the juvenile justice system.

S 254 earmarks one-third of the \$600 million Juvenile Delinquency Prevention Challenge Block Grant fund for prevention, including mental health services. There is concern that this money will not be appropriated, even if the bill passes, because of the debate about using accountability funds for prevention needs.

## School Violence Bills Held Over Until Fall

Both houses in the General Assembly were considering a number of bills aimed at curbing violence in schools. Although legislators put off additional action on these bills until the fall, PCPA members should contact their legislators during the General Assembly's recess to discuss appropriate legislative responses to the complex issue of school violence. In particular, members can mention the Student Assistance Programs (SAP) that are already in place in 501 school districts and the availability of the Office of Children, Youth and Families in each county. You can also request that hearings be held to elicit informed input on responses to school violence. Hearings would be a much better approach than "quick fix" legislation.

## General Assembly Adjourns; Senate Confirms Four for New Board

The Pennsylvania General Assembly adjourned on June 16 until late September. Despite a flurry of activity, not many bills of significance to PCPA members moved during the past few months. One action of interest to PCPA members was the Senate's confirmation of four of the five persons nominated by Governor Ridge for the newly constituted Board of Social Workers, Marriage and Family Therapists and Professional Counselors.

Those confirmed in the final days before adjournment include two marriage and family therapists, Tom Matta of Erie and Grace Bohr of Scranton, and

mental health counselor J. Michael Wilkins of New Castle. Also confirmed was Raymond Hoover, who owns a rehabilitation company in Camp Hill. The clinical social worker nominee, Helen Morris of Camp Hill, is expected to be confirmed when the Senate returns in the fall. One final counselor nominee remains to be announced by the Governor and confirmed by the Senate to round out the complement of six new board members.

## LB&FC Releases Reports on Health Care and Children & Youth Services

The joint House-Senate Legislative Budget & Finance Committee (LB&FC) released two reports of interest to PCPA members on June 16. *Commonwealth Efforts to Assure Quality of Care in the Changing Health Care Environment* addresses issues of managed care, insurance, special needs populations, HealthChoices, and a variety of other health- and managed care-related topics. The report makes many recommendations, including setting guidelines for managed care plans' definition of **medical necessity**, expansion of the state's managed care legislation (Act 68) to include Preferred Provider Organizations (PPOs), updating the state's health care regulations, setting risk-adjusted rates for special needs populations in HealthChoices, and improving the monitoring of health care and managed care.

*Pennsylvania's Children & Youth System* looks at the state's C&Y system and makes recommendations on service delivery (including mental health & substance abuse), fiscal issues, and regulatory issues. It evaluates the role of the counties and the state in providing, and funding services and recommends that the needs-based budgeting process and the state's reimbursement system for county services be improved. The report also documents the wide variation among counties in monitoring, caseloads, substantiation rates for child abuse, and caseworker turnover.

Both reports provide extensive statistics, in-depth background information, and numerous specific recommendations to address problems and improve systems. The reports are available from the LB&FC (717-783-1600) or through local legislators.

## U.S. Senate Approves Bill Supporting Disability Benefits for Workers

Senators Edward Kennedy (D-MA) and James Jeffords (R-VT) are sponsoring S 331, a bill to allow persons with disabilities to keep Medicare benefits after returning to work and, with state approval, allow low-income persons to keep Medicaid coverage. It is estimated that less than .5% of the nine million persons on disability return to work. On June 16, the Senate voted 99-0 in support of the bill, which now goes to the House, where the bill has considerable support. The only sticking point at this time is how to pay for the measure.

## Legislature Passes Act Restricting Methadone Maintenance Facilities

On June 16 Governor Ridge signed HB 1335, creating Act 10 of 1999. The act prohibits the location of methadone maintenance clinics within 500 feet (approximately one block) from any existing school, public playground,

public park, housing, childcare facility, or place of worship. The requirement applies to any clinics not licensed by the Department of Health by May 15 and excludes those operating in the cities of Pittsburgh or Philadelphia. It allows an exception if the clinic has received approval from the governing body of the municipality in which it will operate.

**ACTION:** In the current conservative climate, this bill may offer the best legislative option available to providers. HB 1335 was the most “reasonable” compromise among a number of similar bills that had been introduced. Substance abuse providers should meet with legislators and conduct site visits during the summer to educate them about the importance and the realities of treatment programs.

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## Secretary Confirmed at DOH

Robert S. Zimmerman, Jr. was confirmed by the state Senate as the new Secretary of Health on June 14. Zimmerman has almost 30 years of service in the Departments of Health (DOH) and Public Welfare (DPW), and served most recently as the deputy secretary of Medical Assistance Programs in DPW.

## White House Calls for Parity for Federal Employees

The June 7 White House Conference on Mental Illness served as the backdrop for the President's announcement that he was ordering full mental health and substance abuse parity for workers covered by the Federal Employees Health Benefits Plan. The plan is the nation's largest private insurance program, utilizing 285 health insurers. Currently, 24 states (including Pennsylvania) have enacted a variety of parity proposals, with bills pending in nine other states. Officials from the federal Office of Management and Budget emphasized that data from states with parity coverage requirements demonstrates that such coverage did not add to the costs of delivering services and strongly indicated that healthcare costs may decrease in the future as a result of coverage for mental health and substance abuse coverage.

## MA Tele-Response System Operational

In operation since July 1, 1998, the MA Tele-Response System provides voice-recorded messages on general billing and payment information that can be disseminated to providers without operator assistance. At the toll free number (877-787-6397) providers can get current information on check mail dates, dates of weekly admittance advice statements, information on what to

do about non-receipt of checks or remittance advice statements, information regarding provider enrollment and address changes, and other general MA billing information.

Richard Henry, Supervisor in the Office of Medical Assistance, notes that the operator assisted provider inquiry lines get a significant number of calls for information that is available through the MA Tele-Response System. The Tele-Response System, available 24-hours per day, seven days a week, increases the ability of providers to receive information when they want it. Questions and additional information can be obtained from Richard Henry or Kay Zimmerman at 717-772-6181.

## Lebanon Issues D&A RFP

The Lebanon County Commission on Drug and Alcohol Abuse will be issuing a Request For Proposal (RFP) to manage the drug and alcohol inpatient non-hospital program, and provide residential and outpatient treatment services at their New Perspectives facility located in Lebanon, PA. Service providers interested in receiving a copy of the RFP should call the Single County Authority Office at 717-274-0427 to be placed on the mailing list.

## Clarification on New “Medication Check” Rate

In an alert dated June 14 PCPA announced the new rates for outpatient psychiatric clinic, D&A outpatient, and partial hospitalization, effective July 1. Clarification is needed for the sixth service listed as “Medication Check,” code W1855. This code should read “Administration and Evaluation of Medication,” not to be confused with the new code W9970 (for outpatient psychiatric clinics) or W9971 (for outpatient drug and alcohol clinics), called “Medication Management Visit” which was released in the Medical Assistance Bulletin dated April 26. Code W1855, Administration and Evaluation of Medication, will be reimbursable at \$15, and is only to be used when a medication is administered. The code can be used by a nurse, nurse practitioner, physician’s assistant, or physician. Codes W9971 and W9970, Medication Management, are reimbursable at \$20 and are for the management of medication performed only by a physician or psychiatrist. PCPA apologizes for any confusion regarding this matter. If you have any questions, please contact Rebecca Heidenheim at the Association.

## MISA Consortium Recommendations Issued

In the fall of 1997 the Office of Mental Health and Substance Abuse Services and the Bureau of Drug and Alcohol Programs convened a group of stakeholders from mental health and drug and alcohol systems to develop recommendations for services for persons with co-occurring mental health and substance abuse disorders. The group, known as the MISA Consortium, identified four initial areas for recommendation: assessment, staff credentials and training, service standards and protocols, and services to adolescents. Subcommittees were formed and charged to develop reports of recommendations. Copies of the Consortium’s recommendations will soon be distributed statewide. PCPA was fortunate to receive early copies at the recent Sprint Training program held in mid-June.

Comments on the recommendations are due August 31. Public hearings will be held across the state in August. Notice of the hearings is included with the recommendations. If you have any questions contact Lynn Cooper at the

Association.

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## EPSDT Bulletin Update

Department of Public Welfare (DPW) staff has informed PCPA that the EPSDT Comprehensive bulletin that we have been waiting for since October 1998 *may* be available for comment in July. It is the intention of DPW to make the document available on the Internet so that it is easily accessed. PCPA will be notified of the date of availability. When the comprehensive bulletin is final, a second bulletin will be published on the procedures required for service descriptions. A meeting of the Behavioral Health Subcommittee will be scheduled when the bulletin is released to allow for review and comment.

## Virginia's Comprehensive Services Act...What Can We Learn?

In 1992 Virginia's legislature passed the Comprehensive Services Act, which dramatically altered the administrative and funding systems providing services to at-risk and troubled youth and families. In our ever-changing environment it is in our best interest to begin to learn from Virginia's model and take steps to begin reviewing strategies and the need for change.

The Act itself has the following intent and purpose "...this law is to create a collaborative system of services and funding that is child-centered, family focused and community-based when addressing the strengths and needs of troubled and at-risk youths and their families in the Commonwealth."

Some key concepts:

- The legislation is a cross-secretarial structure
- The program began with pilot projects
- There are local level management structures
- There is integration of services and funding

## Family Based Certification Exam Scheduled

The PA CASSP Training Institute has distributed applications for the next Family Based Certification exam. The exam for FBMHS Workers who have completed the three-year training program will be held Tuesday, August 31 at the State Office Building in Pittsburgh. For more information contact Dr. Marsali Hansen at the PA CASSP Training Institute, 717-232-3125, Ext. 11.

## CHIP Update

The Children's Health Insurance Program (CHIP) has been expanded to include drug and alcohol and expanded mental health services. Please let us know how we can be of assistance in ensuring a smooth expansion by calling Lisa Lowrie at the Association.

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VALUABLE  
*resources*

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## Roadmap to Harrisburg Provides Practical Lobbying Information

The Pennsylvania Economy League has printed an excellent guide to state government relations, *Roadmap to Harrisburg*. The 35-page booklet is an easy-to-use guide to navigating the confusing legislative maze and provides information on successfully working with elected officials. Copies are available from the Pennsylvania Economy League at 215-557-4434 or [pel@libertynet.org](mailto:pel@libertynet.org). You can visit their web site at [www.libertynet.org:80/~pel](http://www.libertynet.org:80/~pel).

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HOT  
*link*

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## www.healthlaw.org

The National Health Law Program (NHeLP) is a national civil rights organization working for justice in health care for low-income people. NHeLP hosts an information-packed web site including:

- Legal research
- Recent news headlines on healthcare issues
- Important information broken down into easily accessible subjects
- Up-to-date Alerts
- Extensive links
- Information about obtaining the quarterly newsletter *HealthAdvocate*
- NHeLP search engine to locate information
- NHeLP web site update listserv

If you know of a web site you would like to share with other PCPA members, submit the information to [Mary Ellen Parmer](mailto:MaryEllen.Parmer).

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## IT'S *classifieds*

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### Clinical Supervisor

Residential Psychology Services JCAHO-accredited mental health agency seeks doctoral level psychologist, licensed or license-eligible in PA, for progressive position of leadership in 56-bed residential treatment program for severely emotionally and behaviorally disordered children and adolescents. Directs development of clinical practices and procedures in the residential living units and provides supervision and training to subordinate staff. Other responsibilities include treatment and QI team meetings, develop/present inservice training to staff, and clinical consultation/program development for the campus school. Provides psychological evaluations, individual, family, and group psychotherapy, intake, crisis assessment and intervention. Position requires some on-call and evening hours. Requirements: Clinical, school or counseling psychologist with significant experience in child and adolescent residential treatment, including knowledge and experience with school/educational systems. Position reports to Director of Clinical Services. Minimum of two year's supervisory and management experience in a child and adolescent setting. Salary commensurate with experience. Competitive benefit package. Send resume and cover letter to Sarah A. Reed Children's Center, 2445 W. 34th Street, Erie, PA 16506.

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## CONFERENCES *trainings*

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|--------------|---|
| July 9       | <i>Domestic Violence.</i> Keenan House, Allentown, PA. Call Treatment Trends, Inc. at 610-439-8479 for more information.  |
| July 13      | <i>AIDS Planning Coalition of South Central PA Networking Brunch.</i> AIDS Planning Coalition, Camp Hill, PA. For more information contact Lisa Miller at 717-761-7628.                 |
| July 20 – 22 | <i>Matching and Decision making, Eighth Annual Adoption in Pennsylvania Conference.</i> Penn Stater Conference Center Hotel, State College, PA. For more information call 717-531-6483. |
| July 23      | <i>Sexuality and Addiction.</i> Keenan House,   |

- Allentown, PA. Call Treatment Trends, Inc. at 610-439-8479 for more information.
- August 8 – 13      *Progress Through Partnership: Summer Autism Institute.* Penn Stater Conference Center Hotel, State College, PA. Call the Pennsylvania Autism Institute at 814-863-5130 or e-mail [ConferenceInfo1@cde.psu.edu](mailto:ConferenceInfo1@cde.psu.edu) for more information.
- September 23 – 24      *Working With the Dually Diagnosed, Part 1.* Keenan House, Allentown, PA. Call Treatment Trends, Inc. at 610-439-8479 for more information.
- October 5 – 8      *Common Grounds: Working Together Toward a New Future.* PCPA Annual Conference. Seven Springs Mountain Resort, Champion, PA. Contact the Association for more information.
- October 7– 8      *Working With the Dually Diagnosed, Part 2.* Keenan House, Allentown, PA. Call Treatment Trends, Inc. at 610-439-8479 for more information.

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