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PA Budget Negotiators Aim for Final Agreement

PA Governor Tom Corbett and legislative leaders in the General Assembly continued negotiations over a state budget as they neared a June 30 budget deadline and expected to meet the budget deadline and produce a budget on time and on target. The final budget is expected to be about 3 percent less than the FY 2010-2011 budget (a reduction to a final budget that between $27.1 and $27.3 billion compared to this year’s $28 billion). The FY 2011-2012 budget would reflect substantial cuts in spending on education and health and human services programs. Budget negotiators (there are no Democrats in the negotiations) have said that they are aiming at keeping spending at less than current levels, not raising taxes and signing a budget on or before June 30. The House and Senate are scheduled to be in session on through June 30. Negotiations are said to revolve around the level of aid for public schools, universities, Medical Assistance programs, and social services. Restoration of a substantial portion of the $27 million cut to funding for food and housing for group homes and a restoration of $37 million in hospital funding are still being considered. FMI: See www.pahouse.com and www.pahousegop.com. See also www.pasenate.com and www.pasenategop.com

DPW ODP Rescinds Announcement on Fees for Nonresidential Services

On June 22 the PA Department of Public Welfare (DPW) Office of Developmental Programs (ODP) issued ODP Alert 080-11, rescinding a previous policy memorandum (ODP Informational Memo #074-11) on rates for non-residential services provided under the Medicaid waiver to individuals with intellectual disabilities. ODP Alert 080-11 canceled effectively the original policy memorandum (ODP Informational Memo #074-11) that had been issued on June 16, 2011 and a formal announcement that had been submitted for publication in the June 25 edition of the Pennsylvania Bulletin. On June 23 the PARF MH MR Finance Committee and the PARF Residential and Vocational Divisions met via teleconference to review all announcements published to date by ODP. DPW noted that its formal notice of payment rates set to be published in the June 25, 2011 edition of the Pennsylvania Bulletin would be formally withdrawn at a later date. The announcement published in the June 25 edition of the Pennsylvania Bulletin and now to be rescinded announced that DPW planned to implement new rates for select services funded through the Consolidated and Person/Family Directed Support waivers (waivers) and Targeted Service Management (TSM) effective July 1, 2011. They are: supports coordination, home and community habilitation unlicensed, licensed day habilitation (adult training), prevocational services, supported employment, transitional work and all waiver funded respite services, excluding respite camp which is a vendor service. Interested persons are invited to submit written comments regarding rate changes to DPW at the Office of Developmental Programs' rate-setting mailbox at ra-ratesetting@state.pa.us, use subject header "PN Fee Schedule," or Department of Public Welfare, Office of Developmental Programs, Division of Provider Assistance and Rate Setting, 4th Floor, Health and Welfare Building, Forster and Commonwealth Avenues, Harrisburg, PA 17120. FMI: See www.odpconsulting.net and www.pabulletin.com.
PA Senate Approves Concussion Bill

On June 22 the PA Senate approved Senate Bill 200, a measure introduced by Senator Pat Browne (R-16) to increase awareness and prevention of traumatic head injuries among Pennsylvania's scholastic athletes. The bill now goes to the House of Representatives for consideration. Under the Safety in Youth Sports Act, students showing symptoms of a concussion can be sidelined by officials, coaches, athletic trainers, licensed physicians, licensed physical therapists or other officials designated by the school and barred from participating in games, competitions, scrimmages or practices until evaluated and medically cleared by an appropriate medical professional. SB 200 would include students participating in interscholastic activities, athletic contests or competitions sponsored by or associated with a school entity, including cheerleading, and sports activities sponsored by clubs and school-affiliated organizations. SB 200 sets certain requirements: (a) Requires the PA Department of Health and the PA Department of Education post information on risks of head injuries and concussions on their websites; (b) requires students and their parents review information regarding the risk of head injuries and concussions before participation in scholastic sports activities; (c) requires students showing signs of brain trauma be taken out of a game and be evaluated by an appropriate medical professional who is trained in the management and evaluation of concussions before they return to participation – with penalties for coaches who violate this provision; and, (d) requires training of coaches in the risk of brain injury in scholastic sports in a program certified by the Center for Disease Control (CDC) or the National Federation of State High School Associations. FMI: See www.legis.state.pa.us

PA Representatives Encouraged to Act on Safety in Youth Sports Act

Since the Pennsylvania Senate approved the Safety in Youth Sports Act (SB200) on June 22 The Brain Injury Coalition, including PARF, is increasing efforts to gain approval of the legislation by the State House of Representatives. The bill is expected to be considered by the PA House Education Committee on Tuesday, June 28th. PARF members are encouraged to contact their state representative today to ask him or her to support the Safety in Youth Sports Act. Representatives can be located online at http://www.house.state.pa.us/index.com. (Enter your address in the box in the upper right hand corner of the webpage to obtain the name of the local representative. Click on the name of the State Representative for relevant contact information.) PARF members are encouraged to contact the members of the House leadership who will be instrumental in moving this bill through the process toward a final vote and ask them to support the Safety in Youth Sports Act. They are: Representative Paul I. Clymer- Chairman of Education Committee; Representative William F. Adolph Jr. - Chairman of Appropriations Committee; Representative Samuel H. Smith - Speaker of the House; and Representative Mike Turzai - Majority Floor Leader. The Coalition maintains that it is important that this bill be passed before the summer break so that a law can go into effect for the next school year. If delayed until the fall, it would be challenging to implement mid-school year. PA Representative Tim Briggs is leading the effort on the bill in the House of Representatives. Representative Briggs, who introduced a House bill (HB 200) similar to Senate Bill 200, has stressed that giving districts the standard regulations to follow that are set forth in SB200 will protect coaches and school districts from potential lawsuits. Without regulations in place, coaches and school districts remain at risk. FMI: Contact PARF at parfmail@parf.org.
PA Senate Confirms Governor’s Appointments of Alexander at DPW, Hearthway at L&I

All of selections made by PA Governor Tom Corbett for his cabinet have now been confirmed. On June 22 the PA Senate voted unanimously to confirm the appointment of Julia K. Hearthway as Department of Labor and Industry Secretary. On June 23 the PA Senate confirmed the nomination of Gary Alexander as secretary of the Department of Public Welfare. FMI: See www.state.pa.us.

PA House of Representatives Passes Voter ID Bill

On June 23 the PA House of Representatives approved by 108-88 a bill that would require voters to provide a federal or state issued photo identification card each time they vote. House Bill 934, sponsored by Rep. Daryl Metcalfe (R-Butler) would require all Pennsylvania voters to show government-issued photo ID before they vote. House Bill 934 has been referred to the PA Senate for consideration. Under the bill, a free photo ID would be available through the state Department of Transportation. The bill would allow people without sufficient identification to cast provisional ballots, then return to the county courthouse within six days to prove who they are. Current law only mandates identification for people when they vote in a polling place for the first time. FMI: See www.pahouse.com and www.pahousegop.com. See www.legis.state.pa.us and enter HB 934.

PA Senate Approves Legislation to Drop Mental Retardation as Descriptive Term

On June 23 Pennsylvania Senate approved SB 458, legislation that changes the name of Mental Health and Mental Retardation Act of 1966 and calls for striking the phrase “mental retardation” from Pennsylvania statutes and require that the term “intellectual disabilities” be used in lieu of the term “mental retardation” in state documents and communications. Senate Bill 458 amends the Mental Health and Mental Retardation Act of 1966 to rename it the Mental Health and Intellectual Disability Act of 1966. Under the legislation, the term “mental retardation” would be replaced with “intellectual disabilities” in all state communications, including publications and websites. The bill has been sent to the House. The federal government and several states, including New Jersey and Massachusetts, have already updated their department titles and publications with more appropriate terms. FMI: See www.legis.state.pa.us.

PA Senate Passes Fair Share Legislation

On June 21 the PA Senate approved 32-18 legislation that reforms the practice of joint and several liability in Pennsylvania. The language of SB 2 was inserted into Senate Bill 1131 and then approved. Under the practice of joint and several liability as currently followed, a defendant found liable in a civil suit could be held 100 percent responsible even if their responsibility is only 1 percent. Senate Bill 1131 would disallow joint liability in cases where a defendant is less than 60 percent legally responsible. Under the legislation, defendants could still be held fully responsible, regardless of the percentage of their legally-assessed responsibility if they intended to misrepresent or break the law or released a hazardous substance or violated the state liquor code. The bill now heads to the state House of Representatives, which voted 112-88 to pass a similar bill (House Bill 1) in April. Governor has endorsed the Senate version of tort reform. FMI: See www.legis.state.pa.us
DPW Discontinues Hospital QI Pilot and Quality Care Investment Grant Programs

In the June 25, 2011 edition of the Pennsylvania Bulletin, the PA Department of Public Welfare (DPW) announced its intent to discontinue the Hospital Quality Incentive Pilot Program (Pilot Program) and Hospital Quality Care Investment Grant Program (Grant Program). The HQI Pilot Program rewarded a hospital's performance on various quality related measures. DPW provided for incremental adjustments to the scheduled increases to be applied to inpatient disproportionate share hospital and Direct Medical Education payments based on the hospital's performance on these quality measures. Through an application process, the HQCI Grant Program provided an incentive for acute care general hospitals to initiate quality improvement projects by offsetting some of the costs related to the implementation of the project. The Commonwealth's budget in Fiscal Year (FY) 2010-2011 did not provide funding for the Pilot Program and funding is not included in the Commonwealth's proposed 2011-2012 budget. Additionally, the Commonwealth's budget in FY 2010-2011 did not provide funding for the Grant Program and funding is not included in the Commonwealth's proposed FY 2011-2012 budget. Interested persons are invited to submit written comments regarding this notice to the Department of Public Welfare, Office of Medical Assistance Programs, c/o Regulations Coordinator, Room 515, Health and Welfare Building, Harrisburg, PA 17120. FMI: See www.pabulletin.com.

DPW Ends 5 Classes of DSH Payments

In the June 25, 2011 edition of the Pennsylvania Bulletin, the PA Department of Public Welfare (DPW) announced its intent to discontinue five classes of disproportionate share hospital (DSH) payments for Fiscal Year (FY) 2011-2012 because funding for these DSH payments has not been included in the Commonwealth's proposed 2011-2012 budget. These five classes of DSH payments are discretionary payments made to hospitals by DPW. The five DSH payments proposed to be discontinued are: (1) DSH payments to certain qualifying hospitals based on obstetrical and neonatal intensive care cases; (2) DSH payments to certain qualifying Medical Assistance enrolled acute care general hospital burn centers; (3) DSH payments to qualifying hospitals based on the designation as a Critical Access Hospital or as a qualifying rural hospital; (4) DSH payments to hospitals that qualify as a trauma center; and, (5) DSH payments to certain academic medical centers. Based on the FY 2010-2011, the FY 2011-2012 fiscal impact as a result of the withdrawal of these payments is projected at savings of $99.651 million ($44.631 million in State funds). FMI: See www.pabulletin.com.

DPW Lists PA Hospitals Qualifying for Disproportionate Share Payments

In the June 25, 2011 edition of the Pennsylvania Bulletin, the PA Department of Public Welfare (DPW) published the names of each inpatient acute care general hospital, rehabilitation hospital and private psychiatric hospital qualifying for a disproportionate share payment and their respective disproportionate share payment percentage for the period July 1, 2010, through June 30, 2011, and their respective payment percentages. DPW also listed facilities qualifying for additional disproportionate share payments that had a Medicaid inpatient utilization rate of not less than 1% and that provided services to persons who have been determined to be low income by meeting the income and resource standards for the State's General Assistance Program. Those qualifying hospitals qualifying for the Charity Care component of the Community Access Fund are also identified. FMI: See www.pabulletin.com.
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DPW Publishes MA Fee Schedule for Services in the Adult Autism Waiver

In the June 25, 2011 edition of the Pennsylvania Bulletin, the PA Department of Public Welfare (DPW) published fees for certain services provided to Adult Autism Waiver participants effective July 1, 2011. DPW made changes in the fees for various services: Behavioral Specialist Plan Development; Behavioral Specialist-Ongoing; Community Inclusion; Day Habilitation Services; Family Counseling; Family Training; Job Assessment and Finding; Nutritional Consultation; Counseling; Occupational Therapy; Speech Therapy; Residential Habilitation Services; Respite Services; Supports Coordination-Plan Development; Supports Coordination-Ongoing; Supported Employment; Temporary Crisis Services; and Transitional Work Services. DPW said that it used a market-based approach to develop the fee schedule rates and identified costs that are reasonable, necessary and related to the delivery of the service. DPW said that it also considered provider participation and promotion of provider choice. See www.pabulletin.com.

ODP Publishes Rates for AWC FMS Models

On June 20 the PA DPW Office of Developmental Programs (ODP) issued ODP Communication Number: Packet 079 establishing rates and wage range tables for specific Participant Directed Services (PDS) provided to individuals participating in the Agency with Choice Financial Management Services (AWC FMS) model, effective July 1, 2011. This informational packet makes obsolete ODP Informational Packet #041-11 - Revisions to the Participant-Directed Services Fee Schedule Rates for the AWC FMS wage and benefit ranges and corresponding rates effective July 1, 2010. ODP has developed wage ranges (for six (6) of the eleven (11) PDS categories) for individuals who are self-directing services using the AWC FMS model and a hourly benefit allowance, effective July 1, 2011. The services for which ODP has established wage ranges (with the assigned procedure code for each service) are identified on the area tables (tables 1-4) in Attachment #1 - PDS fee schedule AWC wage ranges effective July 1, 2011. The wage ranges and rates are effective July 1, 2011. More information is provided in the attached Informational Packet. ODP also issued fee schedule rates in a public notice in the Pennsylvania Bulletin. This notice will be available by July 1, 2011. The Pennsylvania Bulletin may be accessed on the internet at: http://www.pabulletin.com.

ODP Issues Rates for VF/EA FMS Model

On June 20 the PA DPW Office of Developmental Programs (ODP) issued ODP Communication Number: Information Packet 078-11. ODP has issued the rates and wage ranges tables for specific Participant Directed Services (PDS) provided to individuals participating in the VF/EA FMS model effective July 1, 2011. ODP has developed wage and optional benefit allowance ranges (wage and benefit ranges) for six (6) of the eleven (13) PDS categories for individuals who are self-directing services using the VF/EA FMS model, effective July 1, 2011. The services for which ODP has established wage and benefit ranges (with the assigned procedure code for each service) are identified on the area tables (tables 1-4) in Attachment #1, PDS VF/EA Wage Ranges Effective July 1, 2011. The updated wage and benefit ranges tables are provided at the end of the communication as attachments. More information is provided in the attached Informational Packet. See www.odpconsulting.net.
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ODP Prepares to Implement Provider/SCO Monitoring Process

On June 24 PA DPW Office of Developmental Programs (ODP) distributed ODP Communication Number: Announcement 081-11 on training and resource information to support the implementation of Provider/SCO Monitoring Process scheduled for August 1, 2011. ODP says that the communication is the first of a series of announcements intended to provide information and important next steps to all parties who will be involved in the new Provider/SCO Monitoring process. ODP says that a future communication will announce when Provider/SCO Monitoring resources have been posted. ODP also says that it will be releasing a series of webcasts designed to provide specific information regarding each part of the new Provider and SCO Monitoring process. These webcasts will be available on the SCOIC, PIC and AEIC, by August 1, 2011. Following the release of these webcasts, ODP has scheduled a series of conference calls for Providers, AEs, and SCO Administrators to address comments and questions related to the new processes detailed in the webcasts. The schedule lists the dates and times for the follow-up conference calls. ODP says that registration information for these calls will be provided in a future ODP communication and will be posted on the SCOIC, PIC and AEIC. Although the follow-up conference calls are divided up regionally, if an organization is unable to participate in one of the calls for their region, the organization may register and participate in one of the other calls. The follow-up conference calls will be recorded for those who are unable to participate in any of the calls. The recorded conference calls are to be posted on the SCOIC, PIC and AEIC within one week after the scheduled call times. FMI: See www.odpconsulting.net for ODP Communication Number: Announcement 081-11.

ODP Annual Year 4 Audit Requirements Posted

On June 20 PA DPW Office of Developmental Programs (ODP) issued ODP Communication 077-11 on Annual Year 4 Audit Requirements. The announcement reports that the document entitled Audit Requirements for Fiscal Year (FY) 2010/2011 Reporting Period (i.e., Year 4 of the Prospective Payment System) has been posted to the ODP Consulting website. ODP encourages providers to review the document closely to ensure understanding of the Year 4 audit requirements (for the FY 2010/2011 reporting period) since some items have changed since Year 3. DPW says that the posted document provides detailed information on the requirements, and the same language will be incorporated into the Year 4 cost report instructions when they are published later this summer. FMI: See www.odpconsulting.net

PMHCA Hosts Training on Peer Support within the Criminal Justice System

The Pennsylvania Mental Health Consumers’ Association, Drexel University and the Office of Mental Health and Substance Abuse Services is hosting a 3-Day Training for Peer Support within the Criminal Justice System. It will be held in Northampton County, October 18-20, 2011. FMI: Contact Liz Woodley, Forensic Peer Support Project Specialist, PA Mental Health Consumers’ Association, 4105 Derry Street, Harrisburg, PA 17111. Phone 717-564-4930 at (717) 564-4930 or liz@pmhca.org. See also www.pmhca.org.
MA Transportation Service Not Available for Psychiatric Rehab and Vocational Services

On June 8 the PA Department of Public Welfare (DPW) Division of Medical Assistance Transportation Programs (MATP) issued Medical Assistance Transportation Program (MATP) Memorandum OPS # 06-2011-023 clarifying its existing policy regarding transportation to psychiatric rehabilitation services as well as vocational services. The memo notes that the MATP Instructions and Requirements, section 5.N, clearly states, “Psychiatric Rehabilitation Service is not an MA covered service.” The memo was sent to all Statewide County MATP Offices. The Division memo said that although several counties are presently transporting Medical Assistance recipients to clubhouses and other social and vocational rehabilitation programs that these programs are not MATP eligible. In its memo MAT adds that the Division has confirmed that PRS is not to be added to the State Plan as a covered MATP service and that MATP county offices shall no longer transport to any psychiatric rehabilitation services. The memo indicates that if the county MATP office is currently transporting recipients to clubhouses and other social and vocational rehabilitation programs, recipients should be given 30 days notice that transportation to PSRs will no longer be provided. The MATP notice says that the 30-day notice should reiterate the continued eligibility of covered services under behavioral health. Any additional questions or request for assistance in implementing any aspect of the Operations Memo were to be directed to the program advisor. The email directive was sent to all shared-ride agencies who provide both MATP and Persons with Disabilities (PWD) transportation. DPW said that transportation to psychiatric rehabilitation services cannot shift to the PWD Program. DPW also said that day-programming services such as sheltered workshops, approved training providers (on the job training programs), adult training facilities, group homes, and mental health day treatment centers are likewise not eligible trip destinations. DPW said that the PWD Program cannot support or sustain funding for transportation of this nature. FMI: See http://matp.pa.gov/Pdf/FileNotesMATPAdvisoryCommitteeMtg03-24-11.pdf and http://matp.pa.gov/PDF/MATP_Handbook.pdf.

BU Center for Psychiatric Rehabilitation Webinar Reviews Peer Services

A webinar featuring highlights of a systematic review of literature on peer-delivered services from 1989 to 2008 will be presented by the Boston University Center for Psychiatric Rehabilitation and Mental Health America on Thursday, June 30th, 2011 from 2:30 - 4:00 pm EST. In 2010 the BU Center for Psychiatric Rehabilitation completed a comprehensive review of research that included all articles on this topic that have been published since 1989 evaluating the effectiveness of peer delivered services. To register for this free webinar see https://www120.livemeeting.com/lrs/8002073444/Registration.aspx?pageName=qzsw7tr8tcmh5v03.
CMS to Award $500 Million under Partnership for Patients

On June 22 U.S. Department of Health and Human Services (HHS) announced that up to $500 million in Partnership for Patients funding will be available by the Patient Protection and Affordable Care Act (ACA) and will be awarded by the Centers for Medicare and Medicaid Services (CMS) Innovation Center. The Partnership’s two goals are reducing harm in hospital settings by 40% and reducing hospital readmissions by 20% over a 3-year period. To achieve these goals, the Partnership is seeking to contract with large health care systems, associations, state organizations, or other interested parties to support hospitals to redesign care processes to reduce harm. When the Partnership for Patients was announced, the Obama Administration committed up to $1 billion in ACA funding to help achieve the two goals. At the time of the announcement, up to $500 million was made available through the Community-based Care Transitions Program to ensure patients safely transition between settings of care. The most recent announcement makes available an additional $500 million in Innovation Center funds to help reduce health care acquired conditions and reduce unnecessary readmissions. See www.hhs.gov

ACA Funds Available to Help Create Workplace Health Programs

On June 23 the U.S. Department of Health and Human Services (HHS) announced the $10 million is now available to establish and evaluate comprehensive workplace health promotion programs across the nation. The initiative, with funds from the Patient Protection and Affordable Care Act’s (ACA) Prevention and Public Health Fund, is aimed at improving workplace environments so that they support healthy lifestyles and reduce risk factors for chronic diseases like heart disease, cancer, stroke, and diabetes. The application deadline is August 8, 2011. Organizations interested in submitting proposals for the Comprehensive Health Programs to Address Physical Activity, Nutrition, and Tobacco Use in the Workplace can find more information at www.fbo.gov.

DOJ, HHS Highlight Joint Efforts to Combat Health Care Fraud

On June 17 U.S. Attorney General Eric Holder and the Department of Health and Human Services (HHS) Secretary Kathleen Sebelius visited Philadelphia where they participated in the sixth regional health care fraud prevention summit. At the summit Secretary Sebelius announced that starting July 1, HHS will begin using innovative predictive modeling technology to identify fraudulent Medicare claims on a nationwide basis and stop claims before they are paid. HHS says that this initiative builds on the new anti-fraud tools and resources provided by the Affordable Care Act to help move CMS beyond its former pay & chase recovery operations to an approach that focuses on preventing fraud and abuse before payment is made. The summits are part of the overall joint health care fraud fighting effort undertaken jointly by the Departments of Justice and Health and Human Services through the Health Care Fraud Prevention and Enforcement Action Team (HEAT). FMI: To review the activity at the summit in Philadelphia, see http://www.hhs.gov/news/press/2011pres/06/20110617a.html. For information on the 2009 Health Care Fraud and Abuse Control Program Report, please visit: www.justice.gov/archive/dag/pubdoc/hcfacreport2009.pdf. To learn more about the Health Care Fraud Prevention and Enforcement Action Team (HEAT), go to www.stopmedicarefraud.gov.
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CMS Call on Medicare FFS Implementation of HIPAA Version 5010 and D.0 Transactions

On June 29 from 1:30 p.m. to 3:00 p.m., the Centers for Medicare and Medicaid Services (CMS) will host a National Provider Call on Medicare FFS Implementation of HIPAA Version 5010 and D.0 Transactions. The target audience for this call includes vendors, clearinghouses, and providers who need to make Medicare FFS-specific changes in compliance with HIPAA Version 5010 requirements. The agenda will include an update on the status of HIPAA Version 5010 and a question and answer session. Question may be submitted in advance of, during, or following the call by email an inquiry to the CMS 5010 FFS Information resource mailbox at 5010FFSinfo@cms.hhs.gov. In order to receive the call-in information, you must register for the call. Registration will close at 2:30pm on Wed June 22 or when available space has been filled; no exceptions will be made. FMI: See http://www.eventsvc.com/palmettogba/062911

CERT Outpatient Rehabilitation Therapy Services Fact Sheet Available

A new publication titled “Comprehensive Error Rate Testing (CERT) – Outpatient Rehabilitation Therapy Services” is now available from the Medicare Learning Network® has been posted at http://www.cms.gov/MLNProducts/downloads/Outpatient_Rehabilitation_Fact_Sheet_ICN905365.pdf. The fact sheet is designed to provide education on Outpatient Rehabilitation Therapy Services to Medicare Fee for Service providers. The fact sheet and includes information on the documentation needed to support a claim submitted to Medicare for medical services.

DOL Announces $20 million in Grants for Transition from Justice Facilities to Workforce

On June 21 the U.S. Department of Labor announced 15 grants totaling $20 million through the Civic Justice Corps program to help formerly incarcerated individuals ages 18-24 reconnect with their communities and find pathways to success through community service and educational opportunities. Beyond service opportunities, the Civic Justice Corps offers postsecondary education and training, community connections, high staff-to-participant ratios, career development, and post-program support and follow-up to help reduce recidivism rates. For a chart listing the grantees, their locations and award amounts see http://www.doleta.gov/ETA_News_Releases/20110944.cfm.

IRS Increases Mileage Rate

Due to the recent increases in the price of fuel over the last six months, the Internal Revenue Service (IRS) is revising the optional standard mileage rates for computing the deductible costs of operating an automobile for business, medical, or moving expense purposes and for determining the reimbursed amount of these expenses that is deemed substantiated. The current standard mileage rates effective January 1, 2011 and remaining in effect for all expenses incurred before July 1, 2011 are 51 cents per mile for business use, 19 cents per mile for medical and moving purposes, and 14 cents per mile for charitable contributions. The revised standard mileage rates will be 55.5 cents per mile for business use, 23.5 cents per mile for medical and moving purposes, and 14 cents per mile for charitable contributions. These revised rates apply to expenses incurred beginning July 1, 2011. Over the six months (January 2011 to June 2011), the U.S. average price of gas per gallon have increased from approximately $3.05 to approximately $3.62, or 18.7%. For more information, see http://www.irs.gov/newsroom/article/0,,id=240903.00.html?portlet=6