Dateline: September 9, 2011

PA Hit by Floods & Emergencies; State Offices Closed

This past week Pennsylvania state officials turned their attention to weather-related problems that caused Pennsylvania Governor Tom Corbett to seek federal relief for 44 counties in Pennsylvania. Massive flooding problems affected northeastern and central Pennsylvania and caused a shutdown of government offices, including the closing of the Capitol Complex in Harrisburg and state offices in Harrisburg Reading and Scranton. Despite heavy flooding in the Harrisburg area, Pennsylvanians awaiting paychecks from the Commonwealth were notified in a press release by PA Treasurer Rob McCord that they would receive those checks on time. McCord said Treasury’s contingency planning and the many Treasury staff who worked despite the office closure made it possible. PARF members in the areas affected by the weather-related events were addressing the needs of the people they serve. FMI: See www.state.pa.us and http://www.globenewswire.com/newsroom/news.html?d=231991.

Legislation Requiring Non-Profits to Pay Taxes on Land to be Introduced in PA Senate

On September 6 PA State Senator Wayne D. Fontana (D-Allegheny) announced his intent to introduce legislation that would require non-profits to begin paying real estate taxes on the value of the land owned by their organization. In announcing his intent to introduce the legislation, Senator Fontana cited a recent dispute between the University of Pittsburgh Medical Center (UPMC) and Highmark and said that the UPMC-Highmark impasse prompted him to introduce the bill. The legislation would require all non-profits to pay taxes on the assessed value of their land only (no buildings) but would exempt the first $200,000 of total land value. The exemption would not be on a per parcel basis, but it would instead apply to all properties owned by the entity. In a press release Fontana said that he first started working on legislation in 2008 to address ongoing issues and concerns with the lack of voluntary payment agreements between non-profits and their host municipalities. Fontana said that since that time, there has been a steep decline in the amount of agreements. Fontana said that he believes that the introduction of the legislation allows the General Assembly the opportunity to debate and to make improvements that can resolve this issue once and for all. FMI: See www.pasenate.com. See http://www.legis.state.pa.us/cfdocs/legis/home/member_information/senate_bio.cfm?id=1041.

Response to DPW Request for Information on Shared Living due September 30

Based upon additional feedback the PA Department of Public Welfare (DPW) has received from stakeholders, DPW extended the response date for its Shared Living Request for Information (RFI) to Friday, September 30, 2011. DPW says that this will be the final extension. The RFI For Shared Living Services (RFI-DPW-ODP) can be accessed by clicking on the following link: http://www.emarketplace.state.pa.us/GeneralEdit.aspx?SID=RFI-DPW-ODP. Responses are to be submitted electronically to Pam Kuhno at sharedliving@state.pa.us.
State Senate Hearing Held on Long Term Care in PA

On September 7 the PA Senate Aging and Youth Committee, chaired by PA Senator Kim Ward (R-Westmoreland), held a public hearing in Beaver County on long term care in Pennsylvania. Committee members heard testimony from PA Aging Secretary Brian Duke and representatives of area agencies on aging (AAA), adult day services, and homecare agencies. Secretary Duke said that in November the department will begin working with long term care providers and others to create a four-year plan to serve older Pennsylvanians and people living with disabilities. It was noted that difficult economic circumstances will require difficult choices as Medical Assistance long term care and health care will continue to determine the Commonwealth's budget in fiscal year 2012-13 and beyond. The hearing agenda and written testimony can be accessed at www.senatorward.com on the Senate Aging and Youth Committee page. See http://pasenategop.com/committees/aging/2011/090711/agenda.htm. On August 26 State Senator John Blake (D-Lackawanna/Luzerne/Monroe) and Senate Democratic Leader Jay Costa (D-Allegheny) held a roundtable discussion at the Allied Services in Scranton on health care, services, and housing issues. See http://www.pasenate.com/?p=5203.

HMS Teleconference on Outpatient Rehabilitation Billing

On September 20 at 1:00 p.m. Highmark Medicare Services will host a teleconference on Outpatient Rehabilitation Billing. Registration and handout materials are now available at https://www.highmarkmedicareservices.com/calendar/parta/teleconferences.html. HMS will review billing guidelines, therapy caps, multiple procedure payment reduction and much more. To participate, dial 1-888-276-8689 and enter the participant code 454822 when prompted. When the call has reached attendee capacity, you will hear the message, “Conference is full”. See https://www.highmarkmedicareservices.com/calendar/parta/teleconferences.html.

Penn Center Invites Public to Talks on Neuroscience & Society

The University of Pennsylvania - Penn Center for Neuroscience & Society has announced its schedule of 2011-2012 Neuroscience & Society Public Talk Series. The public talks are open to the University and external community. The opening talk The Effects of Early Psychosocial Adversity on Brain and Behavioral Development in the 2011-2012 Neuroscience & Society Public Talk Series will be offered on October 6, 2011 from 4:30 p.m. to 6:00 p.m. presented by Charles A. Nelson, PhD, Professor of Pediatrics and Neuroscience, Harvard Medical School and Richard David Scott Chair in Pediatric Developmental Medicine Research, Children's Hospital Boston. The talk will be held in the Golkin Room, Houston Hall, 3417 Spruce St., Philadelphia, PA. If you plan to attend, please RSVP to info@neuroethics.upenn.edu. The other lectures in the series of public talks will be held on Thursdays from 4:30-6:00 PM at the University of Pennsylvania Law School, Silverman Hall, Room 245A (3400 Chestnut Street). The talks in 2011 include: Head Injury in Athletes: When Sports and Public Health Collide on November 3, 2011 with Michael L. Sachs, PhD, Professor, Interim Chair, Department of Kinesiology, Temple University; Rethinking Psychiatric Care: History, Science, and the Long-Term Effects of Psychotropic Medications on December 1, 2011 by Robert Whitaker, Author and Science Writer. For the schedule of the lectures to be offered in 2012 and additional information on the Neuroscience & Society Public Talk Series, please visit http://www.neuroethics.upenn.edu/.
Congress Acts on FY 2012 Federal Budget Appropriations Bills

On September 7 the Senate Committee on Appropriations adopted FY 2012 302(b) subcommittee allocations and approved the FY 2012 Agriculture, Rural Development, Food and Drug Administration, and Related Agencies; Energy and Water Development; and Homeland Security Appropriations Bills. Chairman Inouye's opening statement is at http://www.appropriations.senate.gov/news.cfm?method=news.view&id=48fe9cd2-1a3b-45db-b45f-f87c74d835c4. FY 2012 302b Subcommittee Allocations, Agriculture, Rural Development, FDA (Chairman Kohl), Energy and Water Development (Chairman Feinstein), and Homeland Security (Chairman Landrieu) are posted at http://appropriations.senate.gov/news.cfm?method=news.view&id=3043ec12-6798-4fa0-941cd7a562ccee0ec. The allocations are based on spending $1.043 trillion as established by the Budget Control Act. However, the House Appropriations Committee has already backed an allocation of $1.019 trillion in discretionary spending that would trim about $30 billion from current-year spending. Progress on the passage of the appropriations bills is slow. Eight (8) appropriations bills have not completed full committee action in the Senate. The full House has passed six of the twelve FY2012 appropriations bills (Agriculture, Defense, Energy & Water, Homeland Security, Legislative, and Military Construction/VA). Although three bills (Commerce/Justice/Science, Financial Services, and Interior & Environment) have been approved by the full Appropriations Committee, the remaining three bills (Labor/HHS/Education, State/Foreign Operations, and Transportation) have not yet been reported out of the full committee. The House has no plans to bring any additional individual measures to the floor at this time. Of the 12 FY 2012 appropriations bills before Congress, only the Military Construction/Veterans Affairs appropriations bill has been passed in both the House and the Senate and is ready for conference. It is expected that the U.S. Congress will be acting on continuing resolution to provide additional time to complete the FY 2012 budget. FMI: See www.senate.gov and www.house.gov.

CMS Publishes Final Rule on Electronic Prescribing

On September 6 the Centers for Medicare and Medicaid Services (CMS) published the final rule on electronic prescribing in the Federal Register, Volume 76, Number 172, Pages 54953-54969. CMS considered complaints from providers that the proposed rules were confusing, cumbersome, and duplicative and so modified the proposed rules. In the final rule CMS provide additional significant hardship exemption categories and extended the deadline for requesting significant hardship exemptions to November 1. The regulations are effective on October 6, 2011. The deadline for submission of Hardship Exemption Requests for the 2012 eRx Payment Adjustment is November 1, 2011. To understand the key provisions and impact of the 2011 Medicare Electronic Prescribing (eRx) Incentive Program Final Rule, see A Quick Reference Guide that has been posted to the eRx Incentive Program website on the “Educational Resources” page. See https://www.cms.gov/ERxIncentive/Downloads/2011eRxRule-ORG_08-31-2011F.pdf. Frequently asked questions (FAQs) addressing the 2011 eRx Final Rule, as well as other information and resources about the eRx Incentive Program can be found at the eRx Incentive Program website at http://www.cms.gov/ERxIncentive/. FMI: For regulations see www.regulations.gov at http://www.regulations.gov/#!documentDetail;D=CMS-2011-0108-0263 or the Federal Register Online via the Government Printing Office at www.gpo.gov for FR Doc No: 2011-22629. See also http://www.gpo.gov/fdsys/pkg/FR-2011-09-06/pdf/2011-22629.pdf.
Federal Appeals Court Acts on Health Care Reform

On September 8 the U.S. Court of Appeals for the Fourth Circuit in Richmond, Virginia threw out two challenges to the Obama administration’s 2010 health-care law. The Appeals Court said that it lacked authority to decide whether the measure is constitutional. The judges in both decisions dismissed the cases, saying the court lacked jurisdiction. In one, the judges said a statute that generally blocks lawsuits challenging the collection or assessment of taxes barred them from ruling on the health-insurance mandate. In the other, they said the state of Virginia lacked the legal right to bring its lawsuit. In one of the decisions two of the judges noted that they would have found the law to be constitutional. The cases are Liberty University v. Geithner, 10-02347, and Commonwealth of Virginia v. Sebelius, 11-01057, U.S. Court of Appeals for the Fourth Circuit (Richmond). With the decisions, the court became the second U.S. appellate panel this year to leave the law intact after lower-court judges ruled on its constitutionality. The decisions came in separate cases challenging the statute’s requirement that individuals buy health insurance or pay a tax penalty. A third appeals court threw out that mandate. Supporters of the Affordable Care Act said the decisions were a victory. The rulings broaden the range of opinions on the healthcare law among the intermediate federal courts, a division likely to be resolved by the U.S. Supreme Court. FMI: For an analysis of the cases see http://healthaffairs.org/blog/2011/09/09/court-says-plaintiffs-have-no-standing-to-challenge-affordable-care-act/. For briefs, see http://pacer.ca4.uscourts.gov/opinion.pdf/111057.P.pdf.

House Committee Holds Field Hearing on Federal Job Training Programs

On August 30 U.S. House Committee on Education and the Workforce Chairman John Kline (R-MN) joined Representative Joe Heck (R-NV) in Nevada’s 3rd Congressional District to host a field hearing entitled “Examining Local Solutions to Strengthen Federal Job Training Programs.” The field hearing took place at the Opportunity Village which provides assessment, training and employment services to more than 1,400 youth and adults with intellectual and other disabilities. See http://edworkforce.house.gov/UploadedFiles/08.30.11_guthrie.pdf. To access statements and testimony see http://edworkforce.house.gov/Calendar/EventSingle.aspx?EventID=255984.

HHS-OIG Opinion Favors Telemedicine Plans

On August 29 the U.S. Department of Health and Human Services Office of Inspector General issued Advisory Opinion 11-I-12 (posted September 6, 2011) to a health system concerning the system’s proposal to enter into arrangements to provide neuro-emergency clinical protocols and immediate consultations with stroke neurologists via telemedicine technology to certain community hospitals. The HHS OIG wrote in the advisory opinion that the telemedicine program proposed by the stroke-care hospital and its regional affiliates’ that is seeking the HHS OIG opinion would not violate terms of federal law that make it illegal to use anything of value to induce referrals of Medicare patients. For a copy of Advisory Opinion 11-12 see http://go.usa.gov/02J and http://oig.hhs.gov/fraud/docs/advisoryopinions/2011/AdvOpn11-12.pdf. For more information send an email to public.affairs@oig.hhs.gov.
**PARF NEWS**

**Dateline: September 9, 2011**

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**Policy Experts Warn Against Tightening Eligibility or Reducing Disability Benefits**

On September 8 a paper published in *Health Affairs* and an accompanying issue brief prepared by experts at Mathematica Policy Research (MPR) advise policymakers to focus on structural changes that would make programs more efficient and benefit our nation’s economy, rather than tightening eligibility and reducing benefits to people with disabilities—a path bound to create disproportionate harm for this vulnerable group. The data show that in fiscal year 2008, the federal government spent $357 billion to assist working-age people with disabilities. That amount of spending represents 12 percent of all federal spending. The states provided an additional $71 billion, mostly in Medicaid payments. The authors claim that despite the more than $428 billion in total spending, services provided to those with disabilities are often fragmented, confusing, and ultimately less effective than they could be. Mathematica’s brief shows how the expenditures are spread across multiple agencies that oversee more than 60 different programs to help working-age people with disabilities. The authors warn that spending restraints will affect the working-age population with disabilities and that, unless ways can be identified to make delivery of health care to the working-age population with disabilities more efficient, policy makers may be unable to avoid funding cuts that will further compromise its well-being. FMI: See [http://www.mathematica-mpr.com/publications/pdfs/disability/working-agepeople_ib.pdf](http://www.mathematica-mpr.com/publications/pdfs/disability/working-agepeople_ib.pdf). Read the full Mathematica paper published in *Health Affairs* at [http://content.healthaffairs.org/content/30/9/1664.full?ikey=zdAd5WariaZDi&keytype=ref&siteid=healthaff..](http://content.healthaffairs.org/content/30/9/1664.full?ikey=zdAd5WariaZDi&keytype=ref&siteid=healthaff..)

**Cochrane Review Claims Evidence Poor for Deciding on Quality-Oriented Payment Models**

A new Cochrane review published on September 7 highlights the importance of conducting trial runs for quality-oriented payment models, such as accountable care organizations and medical homes. The authors found insufficient evidence in the medical literature to support or oppose these kinds of incentive schemes. The review was conducted by Anthony Scott, PhD, a professor at the University of Melbourne in Melbourne, Australia, and others. The article appears in the current issue of the *Cochrane Library*, an online collection of databases created by the Cochrane Collaboration, a nonprofit international organization that evaluates medical research. The article notes that lack of evidence cited by the authors should not suggest a lack of effort both in the United States of America and in other countries to reward clinicians for quality of care. The authors note that numerous US private insurers have operated pay-for-performance programs over the past decade. However, the authors of the Cochrane review could find only 7 studies on financial incentives deemed to have a satisfactory design. Of the 7 studies, five (5) examined incentive plans in the United States, and two (2) looked at counterparts in Germany and the United Kingdom. All of the US plans were developed by private insurers to coax quality improvement out of large medical practices. The authors conclude that future studies of pay-for-performance programs should be more carefully designed to address selection bias and other issues with study design. FMI See also [http://www.kaiserhealthnews.org/Daily-Reports/2011/September/08/quality-payment-models.aspx](http://www.kaiserhealthnews.org/Daily-Reports/2011/September/08/quality-payment-models.aspx).
PA Ranks 39th in Long Term Services/Supports to Older Adults & People with Disabilities

A new report released jointly on September 8 by AARP's Public Policy Institute, The Commonwealth Fund and The SCAN Foundation shows some states in the United States significantly out-perform others in the delivery of long-term services and supports (LTSS) to older adults and people with disabilities. The report, *Raising Expectations: A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers*, examines four key dimensions of state LTSS system performance: affordability and access; choice of setting and provider; quality of life and quality of care; and support for family caregivers. It assesses each state's performance as a whole and on 25 individual indicators, some of which were measured for the first time. Overall Pennsylvania ranks as 39th in the listing of states. The rankings for the components of the scorecard (Pennsylvania ranking is in parentheses) are: Affordability & Access (47th), Choice of Setting & Provider (12th), Quality of Life & Quality of Care (22nd), and Support for Family Caregivers (46th). The AARP scorecard indicates that if Pennsylvania were to improve to the level of the best-performing state: 41,352 more low- or moderate-income adults age 21 and older with activity of daily living disabilities in PA would be covered by Medicaid; 15,350 more new users of Medicaid LTSS in PA would first receive services in home and community based settings instead of nursing homes; 4,338 nursing home residents with low care needs would instead be able to receive LTSS in the community; 5,674 unnecessary hospitalizations of people in nursing homes in PA would be avoided. The report shows all states can do better in areas where performance lags. If all states reached levels currently achieved by leading states, the study finds, the U.S. could realize significant gains in health, better care experiences and potentially lower costs. The full report, along with an interactive map that displays state-by-state information, is available at [www.longtermscorecard.org](http://www.longtermscorecard.org). FMI: See [http://www.longtermscorecard.org/DataByState/State.aspx?state=PA](http://www.longtermscorecard.org/DataByState/State.aspx?state=PA). See also [http://www.prnewswire.com/news-releases/first-ever-scorecard-of-state-performance-on-long-term-services-and-supports-finds-wide-variation---illinois-ranks-23rd-nationally-129473488.html](http://www.prnewswire.com/news-releases/first-ever-scorecard-of-state-performance-on-long-term-services-and-supports-finds-wide-variation---illinois-ranks-23rd-nationally-129473488.html).

New Issue of Disability Rights Online News Available

The new issue of *Disability Rights Online News*, the bi-monthly update about the U.S. Civil Rights Division's activities in the area of disability rights, has been added to the ADA website. For the new issue see [http://www.ada.gov/newsltr0711.htm](http://www.ada.gov/newsltr0711.htm) and for recent additions to the website see [http://www.ada.gov/new.htm](http://www.ada.gov/new.htm).

National WISE Ticket to Work Webinar on September 14

National Work Incentives Seminar Event (WISE) Webinar *Ticket to Work: Support Services for People with Disabilities Who Want to Work* will be held on Wednesday, September 14, 2011 at 3:00 p.m. EST. The webinar will present information about special Social Security programs and rules that may apply to individuals because of their medical condition. Work Incentives Planning & Assistance Projects staff and Employment Network representatives will present information on the Ticket to Work Program and Work Incentives, including answers to frequently-asked-questions and concerns and where to find more information and assistance. Register online at [http://chooseworkttw.net/wise/jsp/wise.jsp](http://chooseworkttw.net/wise/jsp/wise.jsp) or call toll free 866-968-7842 or 866-833-2967 (TTY).