PARF NEWS
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ODP Announces FY2013-2014 Rates for Services

On May 24 the PA Department of Public Welfare (DPW) Office of Developmental Programs (ODP) released ODP Informational Memo 043-13 announcing the proposed DPW-established fees for waiver-eligible services, residential ineligible services, and targeted services management (TSM) for FY2013-2014 under the Consolidated and Person/Family Directed Support (P/FDS) Waivers. ODP says that it has finalized the FY 2013-2014 rate setting methodology. The proposed FY 2013-2014 DPW established fees are to be published soon in the Pennsylvania Bulletin. The list of services on the FY 2013-2014 fee schedule is the same as the FY 2012-2013 listing. ODP did not move any additional services to the fee schedule for FY 2013-2014. ODP notes that it did consider the impact that the Affordable Care Act (ACA) may have on provider costs but concluded that costs currently built into DPW rates for employer-paid health care coverage are sufficient to cover employer costs under the new ACA requirements; therefore, no explicit rate adjustment was made for the costs related to ACA implementation. ODP Informational Memo 043-13 says that the fees are effective July 1, 2013 but warns that they are contingent on appropriations by the PA General Assembly for FY 2013-2014. ODP says that providers will not receive an individual rate letter pertaining to the fees. FMI: See www.odpconsulting.net.

DPW and IFO Continue to Differ on Medicaid Expansion

On May 20 Acting Secretary of Public Welfare Beverly Mackereth released a letter to the Independent Fiscal Office (IFO) regarding the organization’s recent analysis of the Medicaid program, expressing concerns over assumptions in the IFO’s April 23 analysis. Acting Secretary Mackereth said that the report has been misinterpreted as a budgetary estimate for the impact of Medicaid expansion. The letter from Acting Secretary Mackereth counters the IFO statements on savings claimed through the General Assistance program and the continuation of the gross receipts tax. It also raises issues related to the timing of funding that would be realized through an expanded program; the program enrollment rate; and administrative and staffing costs of an expanded program. The DPW letter is at www.insurance.pa.gov under the Affordable Care Act. In response to the DPW letter the OFO said that it did release a revised version of its April 22 report on May 13 that slightly lowered its cost savings projection as well as separated out some of the more speculative savings identified in the report. IFO said that the savings questioned by DPW are minor and do not change the overall findings of the IFO. See the IFO response at http://www.ifo.state.pa.us/resources/PDF/MedicaidIFO_letter_to_DPW_May_20_2013.pdf.

PA House Human Services Committee to Vote on Repeal of Human Services Block Grant on June 4

On June 4 the PA House Human Services Committee chaired by Representative Gene DiGirolamo (R-Bucks) will hold a voting meeting on HB 806, repealing the PA Department of Public Welfare’s Human Services Block Grant Program and replacing it with a method for counties to reallocate left over human services money at the local level. On May 15 the committee held a public hearing on the impact of the block grant funding program implemented in FY 2012-13. Immediately afterwards the committee will hold an informational meeting on the RAND report on Medical Assistance (MA) expansion. FMI: See http://www.legis.state.pa.us/cfdocs/cteeInfo/Index.cfm?Code=56&CteeBody=H and http://www.genedigirolamo.com/NewsItem.aspx?NewsID=17427.
DPW Plans for PCP Fee Increase on May 31

At the May 23 meeting of the Pennsylvania Department of Public Welfare (DPW) Medical Assistance Advisory Committee (MAAC) DPW officials reported that payment of the fee increase for primary care practitioners (PCP) will begin on May 31. Retroactive payments to January 1 are scheduled to begin on July 1 and will occur over several payment cycles. Medical Assistance (MA) Bulletin 31-13-34 is set to be posted on the DPW website on May 24. The bulletin establishes Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services as a high priority. Physicians will be paid at least the Medicare 100% rate, and where the current Medical Assistance rate is higher than the Medicare rate, physicians will receive the higher rate. DPW reported that managed care organizations (MCOs) are required to submit their plans for implementing the PCP fee increase to DPW by May 31. The MAAC Managed Care Delivery System Subcommittee will be discussing MCO plans at its June 13 public meeting. FMI: See www.dpw.state.pa.us.

ODP Bulletins on Substitute Care and Coordination-of-Benefits

At the May 23 meeting of the Pennsylvania Department of Public Welfare (DPW) Medical Assistance Advisory Committee (MAAC) a DPW Office of Developmental Programs (ODP) representative provided an overview of two forthcoming draft bulletins: (a) a bulletin on substitute care and life sharing and (b) a bulletin on medical benefits for individuals aging out of EPSDT. The bulletin on substitute care specifies that substitute workers must meet all regulations and must provide the same level of care as the family living/life sharing provider. It further specifies that the rates include the cost of substitute care and that the agency is responsible for paying the substitute worker. The second bulletin specifies the process for coordinating medical benefits between ODP and Office of Medical Assistance Programs (OMAP) for individuals aging out of EPSDT and defines acceptable documentation. FMI: See www.dpw.state.pa.us.

OMHSAS Reports on Staffing and Administrative Activities

At the May 23 meeting of the Pennsylvania Department of Public Welfare (DPW) Medical Assistance Advisory Committee (MAAC) a DPW Office of Mental Health and Substance Abuse Services (OMHSAS) recent staff changes at OMHSAS were noted. OMHSAS indicated that Ellen DiDomenico is the Acting Director, Bureau of Policy, Planning and Program Development; Steven Remillard is the Director, Bureau of Quality Management and Data Review; Dr. Dale Adair is now the permanent Medical Director; and Julie Barley is now the Director of Eastern Operations. It was also reported that (a) training concerning the new bulletin on psychiatric rehabilitation will be held in June; (b) four (4) MCOs have been selected for the Greene County behavioral health contract; (c) a forthcoming bulletin will outline requirements for data-sharing between physical health and behavioral health, with the exception of HIV and substance abuse; and (d) OMHSAS is submitting an application to SAMSHA for funding to provide services to homeless individuals. FMI: See www.dpw.state.pa.us.

L&I Initiates Unemployment Compensation Amnesty Campaign

On May 23 the PA Department of Labor & Industry announced an unemployment compensation (UC) amnesty program aimed at recouping monies owed to the state’s UC fund. The UC amnesty program runs from June 1 through August 31. FMI: See www.makeitright.pa.gov for a link to a payment portal.
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PARF Hosts Seminar on Rehab Nursing Documentation & Nurse’s Role in Teams

On June 6, PARF will be hosting a training session on Rehab Nursing Documentation: Supporting the Nurse’s Role in the Interdisciplinary Team. The one day training session will be held from 9:00 am to 3:00 pm at Dixon University, 2986 North 2nd Street, Harrisburg, PA. This full-day workshop analyzes the difficulties rehabilitation nurses face in providing accurate functional documentation that supports their expertise and importance as members of the interdisciplinary team. The workshop emphasizes how to capture the nursing staff’s burden of care during the admission assessment time frame, which is crucial to identifying the correct CMG for each patient. The presenter will examine many factors that can limit nursing’s integration into the interdisciplinary team’s daily documentation, including internal policies and procedures, inefficient documentation tools, and a lack of documentation that illustrates interdisciplinary communication. Learn how to illustrate the value of rehab nurses as members of the interdisciplinary team and how to help them document their expertise from admission to discharge. For a copy of the flyer and registration form for the workshop, see http://www.parf.org/site2/?page_id=7. For more information, please contact PARF at parfeduaction@parf.org.

DPW BAS 6th Annual PA Autism Training Conference

On June 11-13 the Pennsylvania Department of Public Welfare (DPW) Bureau of Autism Services (BAS) is sponsoring the 6th Annual PA Autism Training Conference. The event will be held at the Eden Resort Inn & Suites, 222 Eden Road, Lancaster, PA 17601. The Conference is entitled “Delivering Autism Services in Pennsylvania: Practical Strategies & Tools.” Registration will close at the end of the day on June 5, 2013. The registration fee is $50 per day, per person. There is no charge for Adult Autism Program Providers Day. Continental breakfast, lunch and continuing education are included. The conference will focus on addressing real-life situations faced by those who work directly with individuals with autism, from the youngest children to older adults. The presenters will share strategies that exemplify best and most current practices developed in Pennsylvania and by nationally recognized autism experts. Participants should be prepared to consider challenges for those individuals with autism they currently support. Each session will offer practical strategies and solutions that can improve the quality of life for people with ASD and their families. To register, you can go directly to the conference registration site: http://www.solutionwhere.com/bastraining/cw/main.asp.

TUC Monograph Reviews Intimacy Interests of People with Mental Health Conditions

The Temple University Collaborative (TUC) has announced that a new monograph on the intimacy concerns of individuals with mental health conditions is now available. The monograph Addressing the Intimacy Interests of People with Mental Health Conditions: Acknowledging Consumer Desires, Provider Discomforts, and System Denial reviews the issues raised by men and women with mental health conditions with regard to the barriers they face in developing satisfactory intimate lives. It also addresses the uneasiness of community mental health practitioners in discussing with the people they serve issues of intimacy and sexuality. Recommendations for the mental health community are included. FMI: See http://tucollaborative.org/pdfs/Toolkits_Monographs_Guidebooks/relationships_family_friends_intimacy/intimacy.pdf
U.S. House Committee Approves FY 2014 Department-Level Fund Allocations

The House sub-allocations reflect the spending priorities established in the House budget resolution by assuming that sequestration remains in place and also by paying for increased defense spending with deeper cuts to domestic discretionary programs. The proposed allocations would limit total base discretionary spending (excluding spending for designated disasters and overseas contingencies) to $967 billion. The limit is $61 billion (5.9 percent) below the base discretionary spending allocation for fiscal 2013 established by the House Committee on Appropriations last spring and $76 billion (7.3 percent) below enacted, pre-sequester fiscal 2013 appropriations. The overall discretionary spending limit for fiscal 2014 proposed by the Committee is reduced to comply with the lower spending caps due to the sequester. Federal Funds Information for States (FFIS) published on May 22 a brief on the House 302(b) allocations and how they compare to current spending levels. Senate and House Democrats continue to argue that fund allocations should not be approved until the House and Senate have reconciled their respective budget resolutions for fiscal 2014. A conference committee has not yet been appointed to reconcile the widely different spending plans.

CMS Invites Applications for Model 1 of the Bundled Payment Initiative

On May 17 Centers for Medicare and Medicaid Services (CMS) published a notice in the Federal Register (Volume 78, No. 96, Page 29139) announcing an open period for additional organizations to be considered for participation in Model 1 of the Bundled Payments for Care Improvement initiative. CMS explained that its CMS Innovation Center is now testing four episode payment models. Testing of the first model – Model 1 of the Bundled Payments for Care Improvement Initiative – began in April 2013 following a review of applications submitted in response to a Request for Application released by the Innovation Center in August 2011. Interested organizations must submit a Model 1 Open Period Information Intake form. CMS advises contact with BPMdModel1@cms.hhs.gov regarding Model 1 of the Bundled Payments for Care Improvement initiative. FMI: For additional information see the CMS Center for Medicare and Medicaid Innovation Website at http://innovation.cms.gov/initiatives/BPCI-Model-1/index.html. To view the May 17, 2013 Federal Register announcement see https://www.federalregister.gov/articles/2013/05/17/2013-11819/medicare-program-bundled-payments-for-care-improvement-model-1-open-period or http://www.gpo.gov/fdsys/pkg/FR-2013-05-17/pdf/2013-11819.pdf.

National Provider Calls on Medicare Shared Savings Program Application Process

On Thursday, June 20 from 1:30-3pm ET and Thursday, July 18 from 1-2:30pm Centers for Medicare and Medicaid Services (CMS) will host National Provider Calls on the Shared Savings Program application process. CMS says the initiative will help providers to participate in Accountable Care Organizations (ACOs). On Thursday, June 20, CMS subject matter experts will provide an overview and updates to the Shared Savings Program application process for the January 1, 2014 start date. A question and answer session will follow the presentations. On Thursday, July 18, CMS subject matter experts will be available to answer questions about the Shared Savings Program and application process for the January 1, 2014 start date. In order to receive call-in information, registration is required on the CMS registration site. FMI: See http://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/Downloads/062013and071813NPCMSSP.pdf. See also http://www.eventsvc.com/blhtechnologies.
National Disability Employment Awareness Month 2013 Theme Announced

The 2013 theme for National Disability Employment Awareness Month (NDEAM) is "Because We Are EQUAL to the Task," which reflects the reality that people with disabilities have the education, training, experience and will to be successful in the workplace. Chosen by the U.S. Department of Labor's Office of Disability Employment Policy (ODEP), this year's theme echoes the message of ODEP's Campaign for Disability Employment to promote positive employment outcomes for people with disabilities. See http://www.dol.gov/opa/media/press/odep/ODEP20131020.htm. See also www.dol.gov.

EEOC Landmark Award to Employees with Disabilities Cut Drastically

On May 16 U.S. Senior Judge Charles Wolle, the federal judge presiding over the jury that awarded $240 million to employees with disabilities working at Henry’s Turkey Service in Atalissa, Iowa, reduced the award to $1.79 million. The case is Equal Employment Opportunity Commission v. Hill Country Farms, 11-cv-00041, U.S. District Court, Southern District of Iowa (Davenport). The jury awarded each worker $5.5 million in compensatory damages and $2 million in punitive damages. However, Judge Wolle said that he must act legally and limit the judgment to $50,000 per employee, the cap included in the Americans with Disabilities Act for businesses with fewer than 101 workers. The drastic reduction to the largest verdict in the history of the U.S. Equal Employment Opportunity Commission (EEOC) comes after Hill Country Farms Inc., doing business as Henry's Turkey Service, was found to have subjected 32 men to verbal and physical harassment, harsh living conditions and other abuses from 2007 to 2009. The EEOC presented evidence that the company exploited the workers because their intellectual disabilities made them vulnerable and unaware of their rights. A June 10 hearing has been scheduled to consider how much interest is owed on the judgment. A $1.37 million judgment for Americans with Disabilities Act wage violations was awarded separately in September 2012. For more information on the September 2012 decision see http://www.eeoc.gov/eeoc/newsroom/release/9-19-12a.cfm. For a summary of the case see http://www.chicagoinjurylawblog.com/2013/05/240-million-awarded-to-abused-iowa-workers.html?utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+blawgs%2Fcbwecom%3AChicago+Injury+Law+Blog%29. See also http://www.eeoc.gov/eeoc/newsroom/release/5-1-13b.cfm and http://blogs.lawyers.com/2013/05/240m-award-to-disabled-workers-slashed/.

CMS Releases Guidance on LTSS Delivered Through Medicaid Managed Care Programs

On May 21, 2013, CMS issued an informational bulletin to announce the release of two important guidance documents on long-term services and supports delivered through Medicaid managed care programs. The documents are: (1) Summary of Managed Long Term Services and Supports Programs Essential Elements and (2) Guidance to States using 1115 demonstrations or 1915(b) waivers for Managed Long Term Services and Supports Programs. To view the documents see http://content.govdelivery.com/attachments/USCMS/2013/05/21/file_attachments/212540/CIB-05-21-2013.pdf. CMS expects states to incorporate these principles into any MLTSS program operating under section 1115 demonstration authority or 1915(b) waiver authority applied in combination with another LTSS authority. CMS will use these principles when reviewing states' design, implementation, and operation of an MLTSS program before approving that program, and on an ongoing basis to ensure program operation is consistent with the elements described in the guidance. FMI: See http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Delivery-Systems/Medicaid-Managed-Long-Term-Services-and-Supports-MLTSS.html.
Health Care Innovation Awards Round Two Webinar on May 28

The Centers for Medicare and Medicaid Services (CMS) Innovation Center will be hosting a webinar on its recent funding opportunity announcement for round two of the Health Care Innovation Awards. The webinar Health Care Innovation Awards Round Two Overview will be held on Tuesday, May 28, 2013 from 1:00 to 2:30pm EDT. The webinar will provide an overview of the Health Care Innovation Awards Round Two and offer opportunity to answer questions. Advance registration is required. Register at https://webcast.adobeconnect.com/eventRegistration/EventLobbyServlet?target=registration.jsp&eventid=618263&sessionid=1&key=DBC89BDB12509E0012C49A82E380CA20&sourcepage=register

In the announcement CMS said it would spend up to $1 billion for awards and evaluation of projects from across the country that test new payment and service delivery models that will deliver better care and lower costs for Medicare, Medicaid, and Children’s Health Insurance Program (CHIP) enrollees. For more information, including a fact sheet and the Funding Opportunity Announcement, please visit the Health Care Innovation Awards Round Two webpage at http://innovation.cms.gov/initiatives/Health-Care-Innovation-Awards/Round-2.html.

CMS Special Forum on Suggested Electronic Clinical Template for Lower Limb Prostheses

On Tuesday, May 28 from 2:00 pm to 3:00 pm Eastern Time Centers for Medicare & Medicaid Services (CMS) will host a Special Open Door Forum on Suggested Electronic Clinical Template for Lower Limb Prostheses. The event is part of a series of Special Open Door Forum (ODF) calls to allow physicians, prosthetists, and other interested parties to give feedback on the Suggested Electronic Clinical Template for Lower Limb Prostheses for possible nationwide use for Medicare. CMS said that in order to enhance physician understanding of medical documentation requirements to support orders for Lower Limb Prostheses CMS is exploring the development of an electronic clinical template that will assist providers with data collection and medical documentation. CMS says that these templates may also facilitate the electronic submission of medical documentation. While not intended to be a data entry form per se, the template will describe the data elements that CMS believes would be useful in supporting the documentation requirements for coverage of Lower Limb Prostheses. The proposed document is at: http://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/ESMD/Lower-Limb-Prosthesis-Electronic-Clinical-Template.html. Comments on the document can be sent to eclinicaltemplate@cms.hhs.gov. To participate dial (800) 837-1935 and enter Conference ID # 75391152.

TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help. A transcript and audio recording of this Special ODF will be posted to the Special Open Door Forum website at http://www.cms.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading.

U.S. Department of Justice Launches Redesigned ADA.gov Website

In the first redesign of its ADA website since 2002, the U.S. Department of Justice launched ADA.gov, an information and technical assistance website on the Americans with Disabilities Act (ADA). The new design incorporates improved navigation and usability features. In addition to the website, technical assistance is available through the ADA Information Line at 800-514-0301 (voice) or 800-514-0383 (TTY). FMI: Visit the ADA.gov website at http://www ada.gov/