**President’s Message**

While the work of PCPA is never done, it is important to reflect on our accomplishments lest we lose sight of them.

Highlights from 2004 include:

On July 4 the governor signed into law the 2004/05 state budget which included a 2% cost-of-living-allowance (COLA) for mental health, mental retardation, and drug and alcohol services (MH/MR/D&A). Admittedly, COLA distribution has proved uneven. However, we must recognize and value the hard work and successful lobbying strategies PCPA members and staff led to achieve this additional funding. This COLA and last year’s successful budget restoration efforts demonstrate the power and influence of many people — one voice and the effectiveness of our collaborations with other partners.

PCPA members developed a summary of “problem regulations and standards” at the request of Department of Public Welfare Secretary Estelle Richman which identified outdated and costly requirements that create barriers to good service. Now that PCPA has clearly framed the “problem issues,” practical solutions can be generated.

PCPA published a set of guiding principles for MH/MR/D&A system redesign to provide a secure foundation for the systems and sustain programs for the future. The association has embraced these principles to inform and guide system improvements for years to come. I urge you to use them as a tool for continuous quality improvement efforts within your agency as well as our collective mantra for system change. The System Redesign Initiative is gathering momentum! There are six active work groups. Please join one! Your voice matters!

Access the redesigned PCPA web site. Use it to keep your agency on the cutting edge.

The Membership Committee developed an Ambassador Program to welcome and sustain new PCPA members. We can always use more ambassadors!

The Annual Conference Committee planned and hosted another top notch learning experience at Seven Springs, packed with state of the art workshops and exciting social/networking events.

As you can see, it’s been a wonderfully busy and successful year at PCPA. I appreciate more than ever the dedication and expertise of PCPA staff. I have been humbled by the energy and commitment of members to make our system of care and service better. Please get involved and stay involved with all PCPA efforts! It has been my privilege to serve. Thank you so much!

Best regards,

Mary C. McGrath, President

**Revenue**

- A Dues — 66%
- B Fees & Other Revenue/Grants — 17%
- C Annual Conference — 14%
- D Investment Income — 3%

**Expenses**

- A Personnel — 66%
- B Annual Conference — 8%
- C Rent & Office — 13%
- D Meetings, Training, Travel — 7%
- E Publication, Postage, Dues — 3%
- F Insurance & Administration — 2%
- G Miscellaneous — 1%
to review and revise regulations. OMHSAS will convene work groups on regulations viewed as problematic. Allegheny Providers submitted comments regarding restructuring and realigning fiscal responsibility regarding restructuring and realigning fiscal responsibility. A year of political action committee (PAC) growth through the leadership campaign, silent auction, the PAC share program with Mercy Behavioral Health, and the PACPot.

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Refunded over $38,000 in membership dues to participating members of the ATX dues rebate program. ATX is an endorsed provider of telecommunications products.

Sixty members participated in the PCPA Worker's Compensation Trust Fund, saving thousands of dollars in insurance premiums each year.

Offered credit union services to PCPA members through a new arrangement with the Pennsylvania State Employees Credit Union.

Brought timely and valuable information on topics such as reimbursement rates, cost containment, legislative and budget addresses, quality improvement initiatives, and outcome measures to the membership through regional meetings.

Presented an educational series through the HIPAA Task Force to assist members in preparing for implementation of the HIPAA Security Rule.

Partnered with the US Department of Housing and Urban Development to provide two major training initiatives on housing.

Sponsored seminars for members on workforce and labor relations.

Participated in a work group to address problems with the Medical Assistance Transportation Program.

Engaged with members in successful lobbying efforts including the Harrisburg Lobby Day, Virtual Lobby Day, and District Lobby Day sponsored by the Government Relations Institute (GRI®) Alumni Network.

Established a web-based legislative tracking device with live links, bill descriptions, bill status, and PCPA positions/activities.

General

- Secured legislative language in the budget bill for a 2% cost-of-living-allocation (COLA) for mental health/mental retardation/drug and alcohol (MH/MR/D&A) programs. Led the effort to include D&A in the COLA allocation.
- Surveyed members to ensure that the intended COLA reached providers. Laid groundwork to address issues with the legislature if the COLA does not come to full fruition for providers.
- Initiated a project to provide a permanent, secure, and expanded funding base for D&A treatment and prevention through the Dedicated Alcohol Tax/Fund initiative.
- Expedited payment of millions of dollars in claims by working with the Office of Mental Health and Substance Abuse Services (OMHSAS) and the Office of Medical Assistance Programs (OMAP) to resolve problems with the PROMISe™ electronic claims payment system.
- Redesigned and maintained a policy and issue oriented web site —www.paproviders.org—updated weekly and averaging 50,000 hits per month.
- Executive Director George Kimes appointed to the Governor’s Commission on Children and Families.
- In concert with the Council of Allegheny Providers submitted 210 comments to OMHSAS on regulations viewed as problematic. OMHSAS will convene work groups to review and revise regulations.
- Realized a 92% membership retention rate and a growth rate of 13%.
- Developed the PCPA Ambassador Program designed to match seasoned and new members to assist with retention.

Mental Health

- Analyzed and submitted comments to the Centers for Medicare and Medicaid Services (CMS) on the Medicare Prescription Drug Benefit proposed rule that would cause harm to dual eligible recipients, particularly those with mental illness.
- OMHSAS/OMAP Restructuring Work Group submitted questions to OMHSAS about its intentions regarding restructuring and realigning fiscal responsibility and program policy for behavioral health services.
- Advocated and secured a more balanced approach to proposed incident management bulletin. Participated on the OMHSAS Incident Management Work Group to assure that provider concerns were addressed.
- Participated in the OMHSAS Blueprint for Recovery conference inaugurating the department’s commitment to recovery-oriented behavioral health systems.
- Executive Director George Kimes appointed to the OMHSAS Older Adult Advisory Committee.
- Julie Weaver, Mental Health Committee chair, appointed to the OMHSAS Adult Advisory Committee.
- Worked with Eli Lilly and Company to continue the Neuro Treatment Team Partners pilot project and to explore options for expansion.

Images of Success

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MENTAL RETARDATION

- Evaluated and commented on draft bulletins for the Office of Mental Retardation (OMR) regarding incident management, certified investigators, choice of qualified providers and staff qualifications, elimination of restraints, and intermediary service organizations.
- Coordinated membership participation at CMS public forums reviewing Pennsylvania’s Mental Retardation Consolidated Waiver.
- In cooperation with other stakeholders, developed the new ICF/MR assessment financial procedures.
- Co-sponsored the Disability Vote Forum to encourage agencies in developing voter registration opportunities for staff and consumers for the Presidential election.
- Co-sponsored a budget rally addressing the need for a COLA for community services and participated in a rally regarding state funding for those waiting for community MR services.
- Represented PCPA on department groups such as the Home and Community-Based Services Stakeholder Planning Team, the Direct Care Workers Work Group, and OMR’s Planning Advisory Committee and subcommittees.
- Met with OMR deputy secretary to address system changes and provider issues and facilitated site visits to PCPA member agencies.
- Advocated for review and changes to the Department of Labor and Industry’s proposal for the development of Regional Direct Care Workforce Centers.
- Participated on OMR’s work group developing the Olmstead Plan for community integration for persons with mental retardation.
- Co-chaired Pennsylvania’s Advisory Committee on Employment for the Medicaid Infrastructure Grant for the Medical Assistance for Workers with Disabilities project.
- Assisted members with residual funding restoration issues.
- Lobbied for and secured increased flexibility for BHSI, changing eligibility criteria.
- Lobbied for and secured a more inclusive interpretation of the D&A staffing ratios.
- Welcomed state officials from the Bureau of Drug and Alcohol Programs, OMHSAS, OAR, Drug and Alcohol Licensing, and the Pennsylvania Association of County Drug and Alcohol Administrators at committee meetings.
- Lobbied for reasonable oversight of buprenorphine in licensed D&A facilities and assisted interested members in providing buprenorphine.
- Participated in numerous task forces/advisory committees relating to issues such as access to recovery, co-occurring disorders, and confidentiality.
- Researched and coordinated gambling treatment information and training initiatives.
- Secured a grant from the Pennsylvania Association for the Treatment of Opioid Dependence for legislative and administrative education efforts.
- Worked to remove “lag time” and expedite enrollment in HealthChoices.
- Lobbied for the revision of the D&A Medical Assistance outpatient regulations.
- Provided critical information to members such as single county authority rates, training opportunities, and licensing exceptions/citations.
- Continued work with the Institute for Research, Education and Training in Addictions (IRETA) to close the “science to service” time lag.

CHILDREN’S SERVICES

- Published a report on education services in child/adolescent partial hospital programs prompting Secretary Estelle Richman to form a work group of providers, advocates, and staff from the Departments of Public Welfare and Education.
- Tracked age of consent legislation. Convened a work group to provide information and guidance on compliance with the new law, Act 147 of 2004.
- Pressed the Department of Public Welfare (DPW) and managed care organizations to reduce required data reporting for behavioral health rehabilitation services under the revised Kirk T. agreement.
- Participated in a variety of statewide planning initiatives including regional commissions on children and families, the Autism Task Force, and the Children’s Behavioral Health Task Force.
- Participated in the DPW county level integrated children’s planning initiative.
- Supported the OMR Planning Advisory Council in developing recommendations to expand the availability of in-home service options for children.
- Developed the information series—Assuring Program Compliance in Children’s Services—with the OMAP Bureau of Program Integrity.
- Established a PCPA presence in planning groups addressing early intervention services and the needs of transition age adolescents and young adults.
- Facilitated regular meetings between PCPA and deputy secretaries of OMHSAS; the Office of Children, Youth and Families; and the Office of Child Development.
- Convened work groups for providers of residential treatment services, partial hospital services, and family based mental health services.
- Children’s Policy Specialist Connell O’Brien elected co-chair of OMHSAS Children’s Advisory Committee.
- The PCPA Blueprint for Children’s Drug and Alcohol Services adopted by OMHSAS as a core planning document.

DRUG AND ALCOHOL

- Lobbied to stop the movement of several categories of clients from HealthChoices to fee-for-service, which would have limited services in the D&A system.

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PCPA honors its association presidents at dinner in October sponsored by Tsoules, Sweeney, Kepner & Martin, LLC. Standing (l to r): Mike Ratajczak, Mary McGrath, Pete Rubel, Julie Weaver, Alan Hartl, Rex McClure, Joe Knecht, Susan Blue, Jim Gavin. Seated (l to r): Rich Kocher, Mel Haber, Marvin Batten, David McLane, Ray Webb, Jr., and George Kimes.

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Julie R. Weaver, OTR/L, Community Services Group

Mental Retardation Committee
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Peg Van Schaick, MSS, ACSW, Community Services Group

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