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Amanda Hitz, Adams-Hanover Counseling Services (Resigned mid-year)
William Shutt, Family Care for Children and Youth (Resigned mid-year)
Steven Nevada, Hoffman Homes (Resigned mid-year)

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William Parfitt, Wordsworth
Jerry Skillings, PsyD, Elwyn
John White, The Consortium

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Diane Len, FamilyLinks
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John Yates, Dickinson Mental Health Center

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Julie Weaver, OTR/L
Peter Rubel
Mary McGrath

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This has been a very significant year for the Pennsylvania Community Providers Association, evidenced by outcomes in the areas of legislative affairs and drug and alcohol, forensics, mental retardation, and children’s services.

PCPA was instrumental in the introduction of two bills to the Pennsylvania legislature. The Dedicated Alcohol Tax was designed to secure additional long-term funding for D&A services. It did not make it to the assembly floor for a vote, but will be reintroduced in 2007. The second bill tied a cost of living increase to the home health market basket index, promoting a stable source of increased revenues without relying on cost-of-living adjustments. This bill passed both the House and Senate, but was vetoed by the governor just prior to the election. While we did not obtain the outcomes we sought, we were instrumental in the crafting of bills and driving the agenda, rather than only responding/reacting to others. This is being proactive, being leaders.

We are advocating for a systemic method to regularly update service reimbursement rates so that the payments we accept cover our costs of doing business. While there is more work to be done, we are “taking the bull by the horns,” offering solutions and suggesting strategies about how to put this type of system in place for all of our payers rather than settling for the historic rates that are far below our costs. PCPA also began a statewide benchmarking initiative with support of the Office of Mental Health and Substance Abuse Services. Again — leadership and action.

Our public policy agenda includes advocacy regarding changes to the fiscal reimbursement process and regulations for mental retardation, changes to the way long term structured residences are funded, provider qualifications for mental retardation services, confidentiality regulations, co-occurring disorder treatment, and systemic changes to the provision of children’s services. PCPA provides leadership in these and countless other areas related to the delivery of treatment and support to persons and their families with mental illness, drug and alcohol disorders, and mental retardation.

In the coming year we will continue to lead and advocate. Join the wave.

Stephen Christian-Michaels, MA, LSW
President, Board of Directors
Overview

PCPA was legislatively successful with House Bill 1813 (inflationary index for mental health/mental retardation [MH/MR]). The bill passed relevant House/Senate committees unanimously, the full House unanimously twice, and the full Senate with only three negative votes. The first session out for House Bill 1649 (dedicated alcohol tax for drug and alcohol [D&A]) was very successful. The year saw the bill receive a full House Health and Human Services Committee hearing, voted out of the full House unanimously, and voted out of the Senate Public Health and Welfare Committee unanimously. While Governor Edward G. Rendell ultimately vetoed House Bill 1813, and House Bill 1649 did not receive a full Senate vote prior to the close of the legislative session, introduction of and work around the bills accomplished the following:

- Raised the dialogue for long-term funding issues relative to MH/MR/D&A in the commonwealth ensuring the likelihood of inclusion of an adequate cost-of-living adjustment for community health programs in the 2007/08 state budget.
- Resulted in behavioral health and co-occurring disorders being included in the overview of the governor’s Prescription for Pennsylvania/Cover All Pennsylvanians universal health care proposal (yet to be discussed and approved/enacted).

PCPA successfully made the budget argument transition to seeking equity in funding and cost-of-living adjustments, continuing to demonstrate that MH/MR/D&A and thereby community health are vital components of the overall public health system.

PCPA staff provided representation and advocacy on key statewide advisory groups including the Governor’s Commission on Children, Youth and Families; the Medical Assistance Advisory Committee and subcommittees; the Office of Mental Health and Substance Abuse Services (OMHSAS) Statewide Advisory Committee; the Office of Mental Retardation (OMR) Planning Advisory Committee; and the Institute for Research, Education, and Training in Addictions.

The PCPA Benchmarking project saw almost 80 agencies sign-up to be able to compare performance on nearly 30 clinical, operational, and financial benchmarks. Initial data submission has been completed and members have online reports readily available. Process benchmarking exercises helped members look at promising practices to improve routine access to outpatient care. A second year of funding from OMHSAS was successfully obtained.

PCPA’s advocacy voice in Washington was enhanced as 30 organizations took advantage of the special membership program with the National Council for Community Behavioral Healthcare.

<table>
<thead>
<tr>
<th>Expenses</th>
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<tbody>
<tr>
<td>A</td>
<td>Personnel—62%</td>
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<tr>
<td>B</td>
<td>Annual Conference—8%</td>
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<td>C</td>
<td>Rent &amp; Office—11%</td>
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<tr>
<td>D</td>
<td>Benchmarking—5%</td>
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<td>E</td>
<td>Meetings, Training, Travel—1%</td>
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<tr>
<td>F</td>
<td>Publication, Postage, Dues—3%</td>
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<tr>
<td>G</td>
<td>Insurance &amp; Administration—4%</td>
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<tr>
<td>H</td>
<td>Member Dues Rebate—5%</td>
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Revenue

A Dues — 62%
B Fees & Other Revenue/Grants — 20%
C Annual Conference — 14%
D Investment Income — 4%
The Government Relations Institute® graduated the 2006 class. The National Council for Community Behavioral Healthcare selected PCPA’s Legislative Affairs Committee and GRI Alumni Network as joint winners of its 2007 Award for Excellence in Grassroots Advocacy.

The Pennsylvania Community Providers Political Action Committee (PCP PAC), led by the GRI Alumni Network, surpassed its fundraising goals — including raising the largest amount ever through the Leadership Campaign and surpassing the $5,000 goal set for annual conference activities. The PAC was a co-sponsor of several legislative golf tournaments including those for Sens. Jake Corman (R-Centre/Juniata/Mifflin/Perry/Union) and Jay Costa, Jr. (D-Allegheny) and Rep. George T. Kenney, Jr. (R-Philadelphia).

The Legislative Affairs Committee and GRI Alumni Network sponsored a four-tier legislative education effort including legislative district education visits, scheduling site visits at member organizations/programs, PCPA’s annual Capitol Day in Harrisburg, and Virtual Advocacy Day centered around proper state budgeting and funding.

Members of the Legislative Affairs Committee and Board of Directors participated in the National Council for Community Behavioral Healthcare’s annual Hill Day in Washington, DC. PCPA representatives met with members and designees of Pennsylvania’s congressional delegation including US Senators Arlen Specter (R) and Rick Santorum (R) and Congressmen Phil English (R) and Tim Murphy (R).

PCPA was actively involved in the Department of Education decision to commit nearly $1 million to school based behavioral health grants that promoted partnerships between schools and community behavioral health providers.

PCPA was invited by the National Council of Community Behavioral Healthcare to participate in the SAMHSA Building Bridges initiative to better integrate residential treatment services into the conceptual framework of community systems of care across the nation.

PCPA organized a Rate Negotiation Work Group to address member concerns about the lack of opportunity to negotiate reimbursement rates, outline costs incurred, and other important information leading to insufficient rates. This issue has a negative impact on quality and access to care. Early in the process the work group expanded to include the other service types in addition to drug and alcohol. PCPA collected data from members, state officials, and managed care organizations. This process becomes even more important as providers work to add specialized services such as co-occurring treatment programs. Jonathon Wolf, Pyramid Healthcare, has served as chairperson and Paul Stanalonis, Stanalonis & Associates, LLC, worked in partnership with PCPA to further research issues and assist with recommendations.

Numerous regional meetings throughout the year addressed member-chosen topics such as unit cost analysis and rate negotiation; audits; compliance programs, including the latest information on corporate integrity agreements and Sarbanes-Oxley Act of 2002; and HealthChoices expansion. Mental health recovery was a critical topic at regional meetings in the latter part of the year with state officials such as Deputy Secretary Joan Erney attending to learn more about PCPA recovery efforts and to share OMHSAS plans and priorities for recovery efforts.

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Overview

Continued from page 5

PCPA developed a special initiative with the Conference of Allegheny Providers to strengthen ties between the two organizations.

PCPA was honored to attend the National Summit to Address the Nation’s Disaster Behavioral Health Preparedness sponsored by the Substance Abuse Mental Services Administration (SAMHSA). Pennsylvania sent a group of nine appointed representatives. The summit, held in New Orleans, had a goal of “response building on the lessons learned from the 2005 hurricanes.” Highlights included the voices of hurricane survivors, leadership in times of disaster, and the latest research on the mental health and substance abuse problems as a result of recent disasters.

The Forensics Subcommittee became a standing committee after nine years of work. In addition, the decision was made to initiate a subcommittee on Juvenile Justice. The committee enjoyed excellent relationships with the Department of Corrections, The Pennsylvania Board of Probation and Parole, and the Pennsylvania Commission on Crime and Delinquency with officials collaborating with PCPA to address important issues. Reentry plans, housing, and the DUI law were addressed. PCPA staff served on the Inter-Disciplinary Advisory Committee on Adult Drug Courts for the Supreme Court of Pennsylvania, Administrative Office of Pennsylvania Courts. The purpose of the committee is the oversight and administration of the commonwealth’s adult drug courts.

PCPA has provided information and assistance to members in obtaining a National Provider Identifier required for use in HIPAA compliant insurance claims by May 23.

A statewide work group to plan behavioral health and aging regional forums held in 2006 and 2007 includes association representation. In addition, the association has supported the work of the Disability Voting Coalition to encourage voter registration.

Weaver, Corman, and Rubel Honored by Association

Julie Weaver, Community Services Group, was the recipient of the 2006 PCPA President’s Award. Recognizing her tireless work, passionate commitment, and formidable leadership that has resulted in a stronger, more effective service delivery system, Ms. Weaver has served the association for more than a decade in roles such as Mental Health Committee chair, Board of Directors president and past president, and the development of numerous projects and work groups while maintaining responsibilities and leadership as a regional director with her own organization.
Receiving the Raymond R. Webb Jr., Government Relations Award were Sen. Jake Corman, chair, Senate Public Health and Welfare Committee and Rep. George T. Kenney, Jr., chair, House Health and Human Services Committee, who was the prime sponsor of HB 1813. In remarks to the audience, Senator Corman noted that the work of providers was central to the well-being of all communities. Corman provided leadership in the Senate for HB 1813 and HB 1649 to address long-term funding solutions for the mental health, mental retardation and drug and alcohol community.

Peter Rubel, Children’s Service Center of Wyoming Valley, was recognized by his peers and the association with the Marilyn Mennis Memorial Award. Rubel has been a member of the executive staff at Children’s Service Center for many years, leading the design and development of new services for children and families. He is recognized across Pennsylvania as a leader in promoting and refining the children’s system of care. In addition, Mr. Rubel has served as chair on numerous committees of the association and is a past president.

PCPA is proud of the opportunity to spotlight the work and efforts of these individuals who continue to provide leadership to assure that people in need receive treatment and have the opportunity for recovery and healthy lives.
October 10 – 13 found 600 providers, family members, state and county officials, managed care representatives, and industry-related partners participating in the PCPA annual conference at Seven Springs Mountain Resort. Keeping with the theme — Embracing Change — the weekly schedule was redrafted to enhance opportunities for networking, include additional educational opportunities, enhance visibility for exhibitors and sponsors, and deliver a closing plenary with state officials discussing system plans and issues. Highlighting activities during the week were presentations of annual PCPA Awards to exemplary individuals in the field, activities sponsored by the GRI Alumni Network and Legislative Affairs Committee to enhance the role of the association’s legislative agenda and political action committee, forums and workshops, networking events, prize giveaways, and ongoing dialogue about enhancement of services to persons with mental illness, substance abuse disorders, and mental retardation. Keynote speaker Rita Miller talked about “change as opportunity,” and the State of the State Plenary brought Deputy Secretary Joan Erney, Office of Mental Health and Substance Abuse Services; Deputy Secretary Kevin Casey, Office of Mental Retardation; and Director Gene Boyle, Bureau of Drug and Alcohol Programs to discuss current initiatives of each office.

Sponsor Thanks

The conference would not be as successful or affordable for guests without the support of sponsoring organizations who provide additional funds to assist in covering the costs of such things as audiovisual equipment, speaker fees and travel requirements, receptions and other meal events, and prize giveaways. PCPA extends deepest thanks to these companies for their support of the 2006 event:

- Community Behavioral HealthCare Network of Pennsylvania
- Community Care Behavioral Health Organization
- Value Behavioral Health of Pennsylvania
- Elwyn, Inc.
- Pressley Ridge
- Esteam, Inc.
- CiviGenics, and
- Staffing Plus, Inc.
Attendees Vie for Conference Prizes

Exhibit Hall is designed to showcase products and draw attention to vendors. Attendees are invited to participate in a grand prize drawing by meeting vendors. The 2006 grand prize — $1,000 with American Airlines — went to Mr. Jide Sokale, The Consortium. The PACPot — an opportunity to buy tickets and win a portion of the “pot” raised $2,000 for the political action committee (PAC). Jacquelyn Ruffin, Westmoreland Casemanagement and Supports, won the percentage split. Given the winning ticket by PCPA Executive Director George Kimes, Ruffin donated part of the winnings back to the PAC. Linda Texter, Drug & Alcohol Center, The Reading Hospital won the all-expenses paid weekend for two at Seven Springs in the conference evaluation drawing. Additional thanks are extended to vendors who also provided more than 50 additional drawings for gift baskets and other prizes during the course of the event.

Committee Chairpersons

Children’s Committee
William Parfitt, Wordsworth
Peter Rubel, Children’s Service Center of Wyoming Valley

Drug & Alcohol Committee
William C. Folks, Eagleville Hospital
Terence McSherry, NorthEast Treatment Centers

Legislative Affairs Committee
Alan Hartl, Lenape Valley Foundation
Stephen Christian-Michaels, Family Services of Western Pennsylvania
Jonathan Evans, Safe Harbor Behavioral Health

Membership Committee
Barbara Conniff, Allegheny East MH/MR Center
Karen Graff, Penndel Mental Health Center

Mental Health Committee
Julie Weaver, OTR/L, Community Services Group
Phil Braun, PhD, Lenape Valley Foundation

Mental Retardation Committee
Diane Len, FamilyLinks
Jane Noe, Penndel Mental Health Center

Nominating Committee
Michael Rataczak, Aldie Foundation

Training and Conference Committee
Don Stiffler, Adams-Hanover Counseling Services
Thomas Scranton, Pyramid Healthcare
The dominant theme of 2006 was the pursuit of planning, policy, and practice across and among child serving systems. The Departments of Public Welfare (DPW), Health (DOH), and Education (PDE) continued integrated children’s services planning. PCPA and its members worked to find new and better ways to meet the diverse needs of children, adolescents, and families through participation in county planning activities, the Integrated Children’s Services Advisory Committee, and participation on state review teams commenting on county plans.

PCPA collaborated with DOH in several areas. The association worked with the Bureau of Drug and Alcohol Programs and other stakeholders to develop and promote policy in the area of co-occurring treatment services for youth and participated in the Adolescent Health Task Force that set priorities for grant solicitation processes that include adolescent behavioral health and suicide prevention. PCPA also worked with DOH in the promotion of fetal alcohol spectrum disorder awareness, prevention, and service development resulting in the creation of a statewide task force to develop a comprehensive plan. The association initiated collaboration with the Office of Quality Assurance to ensure a productive relationship with psychiatric residential treatment facilities as DOH assumes responsibility for federal restraint regulation compliance and critical event investigations.

There has been a growing recognition by DPW and PDE that behavioral health services hold the potential for enhancing schools’ ability to achieve goals of academic and personal growth and success for students. In 2006 PCPA participated in the first School Based Behavioral Health conference. Sixteen school based mental health performance grants were funded where school districts partnered with behavioral health providers. PCPA is represented on the PDE leadership team that will develop and promote school and provider partnerships for prevention and intervention.

2006 has seen continued work with the Office of Mental Health and Substance Abuse Services and the Office of Children, Youth and Families related to residential treatment service regulation, funding, and the impact of Medicaid realignment. PCPA has been involved in the Alternatives to Coercive Techniques initiative where members shared successful service innovations to reduce behavioral crises and client restraints. PCPA also expanded collaboration and communication with DPW’s Autism Affairs and the Office of Child Development and Early Learning. PCPA has formed an Early Childhood Behavioral Health Work Group to bring member expertise and creativity to addressing the gap in services for young children.

Final plans were made for the expansion of behavioral HealthChoices statewide. The Children’s Committee began a focused effort to reach out to child and adolescent services staff in all of the managed behavioral health care organizations. The year has included system enhancing presentations by managed care organizations and increased representation by managed care staff at committee meetings and in work groups.
Tremendous efforts were devoted to promoting and assisting with the development of co-occurring/integrated services. Representatives serving on numerous committees assured that member issues were addressed and the initiative moved forward. The Co-occurring Competent level of care was initiated. PCPA successfully lobbied for the establishment of a payment indicator to allow behavioral managed care organizations to pay an enhanced fee for co-occurring services in HealthChoices. The association played a major role in the statewide work group convened at the request of the Governor’s Office to continue development of state infrastructure to support the next tier of co-occurring disorder programming.

PCPA continued to follow administrative and regulatory changes and announcements. Highlights include assessment standards developed by the Bureau of Drug and Alcohol Programs (BDAP), the XYZ Package/Uniform RFI Packet, liability and abatement requirements, and workforce development efforts. A promising highlight was efforts of the Governor’s Policy Office to rescind Chapter 255.5b drug and alcohol confidentiality regulations.

A Buprenorphine Work Group was organized and led by chairperson Glen Cooper, in an attempt to remove barriers to buprenorphine access that exist in Pennsylvania. Issues included payment concerns, formularies, restrictions or limitations, counseling requirements, and the need for buprenorphine to be on the list of life-sustaining medications. Attention was given to prevention and intervention efforts aimed at primary care services. PCPA was part of the Pennsylvania SBIRT (Screening, Brief Intervention, and Referral to Treatment) Project which offers primary care providers a concrete method to address issues of drug and alcohol use.

PCPA continued its relationship with the Institute for Research, Education and Training in Addictions to address educational and informational needs of members. The association established new relationships with other important stakeholders such as the Pennsylvania Recovery Organization - Achieving Community Together (PRO-ACT) and Message Carriers.

The issue of appointment no-shows was addressed through a work group chaired by Mike Calhoun, Greater Erie Community Action Center Drug and Alcohol Services, to begin the task of researching effective strategies. The group joined with Behavioral Pathway Systems, PCPA’s benchmarking partner, to utilize process benchmarking to identify successful strategies.

PCPA joined with New Directions to legally challenge the May 1999 amendment to the Pennsylvania Municipalities Planning Code that prohibits the location of methadone treatment facilities in certain locations. The legal challenge was supported because the statute stigmatizes and discriminates against people obtaining methadone treatment and imperils effective treatment for persons struggling with heroin addiction.

The D&A Committee initiated another look at areas in HealthChoices that need improvement for drug and alcohol services. PCPA continued work on the expansion of gambling addiction treatment efforts, meeting with state officials, gambling treatment experts, and researchers to help members prepare for the expansion of casinos in Pennsylvania and predicted gambling addiction problems.
PCPA credits much of its success in influencing Pennsylvania mental health policy to the leadership of Mental Health Committee Co-Chairs Julie Weaver, OTR/L and Philip Braun, PhD. Their interest in furthering recovery-oriented practice has stimulated discussion and led PCPA to move to the implementation phase of recovery-oriented programs and services. PCPA has supported the development of peer support programs and advocated for continuation of peer supports in many guises as the possibility of Medical Assistance payment for these services is anticipated. The association monitored the transition of individuals to community settings following the closure of Harrisburg State Hospital. PCPA was signatory, along with the Mental Health Association of Southeastern Pennsylvania and others, to a letter to Governor Rendell rebutting the request of Dr. Suzanne Vogel-Scibilia of the National Alliance on Mental Illness to place a moratorium on state hospital closures.

PCPA is represented on the Office of Mental Health and Substance Abuse Services (OMHSAS) Adult and Older Adult Advisory Committees. PCPA commented on the OMHSAS bulletin that recognized a need for provision of mental health services for older adults, including persons with dementia, who also have mental health care needs. Staff reviewed the Memoranda of Understanding between county mental health and aging administrations. PCPA supports the Behavioral Health and Aging Coalition of Pennsylvania in its efforts to work with the legislature to request a Legislative Budget and Finance Committee study of behavioral health services for older adults, similar to that done for children’s services. The association was part of the suicide prevention awareness event held at the Capitol and in planning a statewide suicide prevention awareness conference. Members and staff were also involved in development and implementation of incident management and reporting procedures for long-term structured residences (LTSRs) and community residential rehabilitation services. Incident management has progressed to include Community Hospital Integration Programs Project participants. PCPA has been instrumental in identifying problematic issues regarding an OMHSAS proposal for an alternative payment strategy for services provided in LTSRs. PCPA has begun to address issues related to adults with Autism Spectrum Disorders.

PCPA worked with the Medicare Rx Coalition and the Department of Public Welfare (DPW) on implementation of the Medicare Part D prescription drug benefit and the difficulties encountered by individuals with behavioral health needs. The association has provided additional related information and advocacy on requirements for documentation of citizenship, requirements for fraud and abuse training and compliance plans, and information regarding the Medicaid Integrity Program.

Staff prepared and made available to the Mental Health Committee a compilation of reference materials for Medicare “incident to…” billing. Staff has also worked with OMHSAS on continuing access to behavioral health services for individuals who are eligible for both Medicare and Medical Assistance.

Written testimony was presented to the DPW Pharmacy and Therapeutics Committee on the Preferred Drug List and the need for continuing access to a broad array of medications and physician discretion in prescribing medications. PCPA staff participated in the OMHSAS work group for the Substance Abuse and Mental Health Services Administration Block Grant application. PCPA participated in the Intragovernmental Council on Long-Term Care Housing Advisory Work Group addressing housing needs of older adults requiring behavioral health supports.
The Mental Retardation Committee and staff serve on a variety of state work groups/committees to provide input and guidance for the consolidated home and community-based services waiver changes required by the Centers for Medicare and Medicaid Services (CMS). Initiatives focused on rate setting criteria, statewide assessment, dispute resolution procedures, provider qualification criteria, and development of appropriate contracts between various stakeholders. CMS reauthorized the consolidated waiver in December 2006. The Office of Mental Retardation (OMR) created an action plan for changes needed to satisfy CMS issues with waiver implementation and the movement towards a uniform state managed system of services for persons with mental retardation.

PCPA offered training to assist members with the transition to the new fee-for-service environment. The session focused on review of fiscal and operations implications of the rate setting bulletin, current approaches to effectively determining true operation costs, exploration of proposed rate approval, provider dispute resolution process, and identification of steps to manage this new reimbursement methodology.

Committee co-chairs and board officers held regular meetings with OMR Deputy Secretary Kevin Casey to offer input and discussion regarding system changes and various components which impact provider business and services. Casey was a featured speaker at the 2006 conference. He indicated that system changes impact both the Consolidated and Person/Family Directed Support waivers.

Additional OMR committees where PCPA was represented and offered system advocacy for members included:

- Planning Advisory Committee
- Olmstead Planning
- Altoona State Center Closure
- Quality Improvement Employment
- ICF/MR Task Force
- ICF/MR Employment Initiative
- Provider Profile
- Financial Implementation Advisory Team
- Medications Administration, and
- Provider Council.

PCPA provided system advocacy and networking through involvement on state-level committees and work groups which directly or indirectly impact the mental retardation system. These included the Department of Public Welfare’s Stakeholders Planning Team as well as the Office of Health Care Reform initiatives addressing Money Follows the Person, Aging and Disability Resource Centers, and Cash and Counseling.

Responding to numerous draft bulletins offered members the ability to directly impact the system. Comments were submitted on bulletins addressing rate setting procedures, supports coordination, intake and registration, individual support plans, and certified investigators.

Member communications were provided through Provider News, including a special “Provider Promising Practices” section. Twenty-one mental retardation focused Infos covering over 120 topics and regularly scheduled committee meetings offering open discussion and system updates from OMR and other state department staff were provided.

PCPA thanks the committee co-chairs and numerous volunteers who have worked diligently to represent the membership. Members provide a wealth of information to the system and advocate for the efficient use of resources to serve individuals with mental retardation in a variety of community settings.
**Full Members**

- Achievement Center, Inc.
- Adams-Hanover Counseling Services, Inc.
- Addiction Medicine and Health Advocates, Inc.
- Adelphi Village, Inc.
- Aldie Foundation, Inc.
- Allegheny East MH/MR Center, Inc.
- Alliance for Infants and Toddlers, Inc.
- Allied Services, Mental Health Services
- Alternative Community Resource Program, Inc.
- ARC Manor
- Arc of Centre County
- Barber National Institute
- Behavioral Health Services of Wyoming Valley
- Bell Socialization Services, Inc.
- Cambria County MH/MR Program
- Carbon Lehigh Intermediate Unit #21
- Case Management Support Services
- Case Management Unit
- Catholic Social Services
- Catholic Social Services
- Cen-Clear Child Services, Inc.
- Center for Autistic Children
- Center for Mental Health
- Centerville Clinics, Inc.
- Central Montgomery Mental Health/Retardation Center
- Chartiers Mental Health and Retardation Center, Inc.
- Chestnut Ridge Counseling Services, Inc.
- Child Guidance Resource Centers
- Children's Behavioral Health Services, Inc.
- Children's Center for Treatment & Education d/b/a Beacon Light
- Children's Crisis Treatment Center
- Children's Service Center of Wyoming Valley, Inc.
- CiviGenics, Inc.
- Clearfield-Jefferson CMHC
- COMHAR, Inc.
- Community Counseling Center of Mercer County
- Community Guidance Center
- Community Medical Center - Inpatient Psych Unit
- Community Services Group
- Consortium, Inc.
- Craig Academy
- Creative Health Services, Inc.
- Dickinson Mental Health Center
- Discovery House
- Drug and Alcohol Treatment Services, Inc.
- Eagleville Hospital/Riverside Care, Inc.
- Elwyn, Inc.
- Evergreen Elm, Inc.
- Excela Health Behavioral Health – Westmoreland
- Family Care for Children & Youth, Inc.
- Family Counseling Center of Armstrong County
- Family Guidance Center
- Family Resources
- Family Services of Western Pennsylvania
- FamilyLinks
- Firetree, Ltd.
- Friendship House
- Gateway Rehabilitation Center
- GECAC Drug & Alcohol Services Network
- Glade Run Lutheran Services
- Greene County Human Services Program
- Hall-Mercer Community Mental Health/Mental Retardation Center of Pennsylvania
- Haven House
- Hedwig House, Inc.
- Hoffman Homes, Inc.
- Holy Family Institute
- Home Nursing Agency Community Services
- Human Services Administration Organization (HSAO)
- Human Services Center
- Intercommunity Action, Inc.
- Irene Stacy Community Mental Health Center
- JEVS/ACT
- Jewish Family & Children's Service
- Jewish Residential Services
- Keystone Center
- Keystone Service Systems, Inc.
- Lehigh Valley Hospital & Health Network - Psychiatry
- Lenape Valley Foundation, Inc.
- Lodge, Inc. of Pennsylvania
- Lourdesmont - Good Shepherd Youth & Family Services
- Mercy Behavioral Health
- Mon Yough Community Services, Inc.
- National Mentor Healthcare, Inc.
- d/b/a PA Mentor
- New Directions Treatment Services
- North Star Behavioral Health Services
- Northeast Community Center for Mental Health/Mental Retardation
- Northeast Counseling Services
- NorthEast Treatment Centers
- Northern Tier Counseling, Inc.
- Northwestern Human Services, Inc.
- Pace School
- Parents League for Emotional Adjustment
- Penn Foundation
- PennKelt Mental Health Center
- Pennsylvania Counseling Services, Inc.
- Perseus House, Inc.
- Philadelphia Health Management Corporation
- Philhaven
- Pressley Ridge
- Pyramid Healthcare, Inc.
- ReDco Group, The
- Regional Counseling Center, Inc.
- Renewal Treatment, Inc.
- Residential Recovery Services, Inc.
- Safe Harbor Behavioral Health
- Salisbury Behavioral Health, Inc.
- d/b/a Milestones Community Healthcare, Inc
- Sarah A. Reed Children's Center
- Schuylkill County Drug & Alcohol Executive Commission
- Schuylkill IU 29 Counsel House Program
- Scranton Counseling Center
- Shawnee Academy
- Silver Springs - Martin Luther School
- Sojourner House, Inc.
- Southwest Behavioral Care, Inc.
- d/b/a SPHS Behavioral Health
- Stairways Behavioral Health
- Step By Step
- Tadiso, Inc.
- Threshold Rehabilitation Services, Inc.
- Transitional Living Centers, Inc.
- Trehab Center, Inc.
- Tressler Lutheran Services, Inc.
- Tri-County Human Services Center, Inc.
- Turtle Creek Valley MH/MR, Inc.
- UHS of Pennsylvania, Inc. d/b/a/ Roxbury
- UPMC Beaver Valley Mental Health
- UPMC Behavioral Health
- UPMC Braddock
- UPMC Horizon
- UPMC McKeensport
- UPMC Northwest
- UPMC Southside Hospital
- UPMC Western Psychiatric Institute & Clinic
- Valley Forge Medical Center & Hospital
- Viaquest Behavioral Health of Pennsylvania
- Wedge Medical Center
- Wesley Spectrum Services
- Westmoreland Casemanagement and Supports, Inc.
- Westmoreland Human Opportunities, Inc.
- Wordsworth
- Wyoming Valley Alcohol and Drug Services, Inc.
- Youth Advocate Programs, Inc.
Associates Members
Advocacy Alliance, The
Allegheny County Department of Human Services
Allegheny HealthChoices, Inc.
Appalachia Intermediate Unit #8
Beaver County MH/MR/D&A
Berks County MH/MR Program
Blair County MH/MR/D&A
Bucks County Mental Health/Mental Retardation Department
Cameron/Elk MH/MR Program
Chester County Department of MH/MR
Community Behavioral HealthCare Network of Pennsylvania
Community Care Behavioral Health Organization
Conference of Allegheny Providers Council on Chemical Abuse
Delaware County Department of Human Services
Delaware Valley Partners in Healthcare Association
Department of Behavioral Health and Mental Retardation Services
Drexel University: Behavioral Healthcare Education
Fayette County MH/MR
Institute for Research, Education, and Training in Addictions
Lackawanna-Susquehanna Mental Health/Mental Retardation Program
Luzerne-Wyoming Counties MH/MR Program
McKean Behavioral Health of Pennsylvania
McKean County Department of Human Services
Montgomery County MH/MR/D&A/BH Program
National Council for Community Behavioral Healthcare
Northeast Behavioral Health Care Consortium
Philadelphia Alliance of Specialized Agencies
Philadelphia Coalition of Community MH/MR Centers, Inc.
Southwest Behavioral Health Management, Inc.
Stauton Farm Foundation
Value Behavioral Health of PA
Venango County Human Services
Westmoreland County MH/MR Program

Business Members
A-Plus Behavioral Health Staffing, Inc.
Allan Collauto Associates Inc.
Askesis Development Group, Inc.
ATX Communications
Behavioral Pathway Systems
Bristol-Myers Squibb Company
Brown & Brown of Lehigh Valley
Butler Woodcrafters, Inc.
CBY Systems, Inc.
Commerce Bank
Commerce Bank, Healthcare Financial Services Group
Community Resource Associates/Midnight Sun Computing
Dacquest
Delta-T Group
First Nonprofit Companies
Furniture Concepts
Henry Dunn, Inc.
Kelley & Murphy
Kirkpatrick & Lockhart, Nicholson, Graham, LLP
Malady & Wooten, LLP
Open Minds
Ortho McNeil Pharmaceutical Services
Post & Schell, PC
Qualifacts Systems, Inc.
Reckitt Benckiser Pharmaceuticals
Staffing Plus, Inc.
Stanalons & Associates, LLC
Susquehanna Consulting & Financial Group
Synergy Behavioral Healthcare
This End Up Furniture Co., Inc.
Tidgewell Associates, Inc.
Tsoules, Sweeney, Martin & Orr, LLC
Unlimited Staffing Solutions, Inc.
USI Mid-Atlantic, Inc.

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PCPA promotes a community-based, responsive and viable system of agencies providing quality services for individuals receiving mental health, mental retardation, addictive disease and other related human services.