MEMBERS IN THE NEWS

Congratulations to Brad Barry

RCPA Congratulates Brad Barry, President/CEO of Child Guidance Resource Centers, on his retirement. Mr. Barry was presented an award at the RCPA Leadership Summit Annual Meeting on May 20.

RCPA NEWS

Secure Your 2015 RCPA Conference Exhibit Space Now

RCPA will host its 2015 Annual Conference October 6–9 at Seven Springs Mountain Resort. The Conference Committee has released exhibit, advertising, and sponsorship information. The event is a highlight for the Pennsylvania mental health, brain injury, intellectual and developmental disability, medical rehabilitation, vocational rehabilitation, children’s, and drug and alcohol provider communities.

Don’t miss out on your last chance to exhibit, advertise, and sponsor the conference, themed “Leading the Way.” Certain to be a sellout, do not wait to submit your exhibitor/advertiser and sponsor forms and payment. The deadline for inclusion in the printed program is June 12, 2015.

The association looks forward to welcoming you to the conference. Please contact Sarah Eyster, conference coordinator, with questions. Space and opportunities are reserved on a first-come, first-served basis, and no reservation is considered complete without payment.

Richard S. Edley, PhD, Appointed to the MAAC for a Second Term

RCPA President & CEO Richard Edley recently received notification from DHS Secretary Ted Dallas of his re-appointment to a two-year term with the Medical Assistance Advisory Committee (MAAC), beginning on August 1. The purpose of the MAAC is to provide the DHS with input on the provision of quality Medical Assistance services in an efficient, economical, responsive manner. Edley is looking forward to working with agency leadership to represent the needs of individuals enrolled in the Medical Assistance Program.
A MESSAGE FROM THE CEO

Unifying Themes

Recently, the RCPA Board of Directors was reflecting on the size and diversity of the association. While there are so many different issues facing each of the divisions, it is also understood that there are common themes that span across all health and human services providers. So what are these “unifying themes?”

I took that question to the RCPA staff, to several members and committees, and again back to the Board. The following represents a first draft of “RCPA Unifying Themes”:

1. Support for initiatives, best practices, and innovation, but only with a realization of the importance of also funding existing infrastructure;

2. The need for adequate reimbursement for effective services with positive outcomes;

3. The need for artificial administrative hurdles (e.g., PROMISe delays, duplicative audits) to be addressed and eliminated;

4. Acknowledgement of potential unfunded mandates (e.g., ACA, minimum wage, increased training requirements), and finding ways for the system to address the unintentional financial burden to members;

5. Understanding that our members are helping consumers with significantly raised acuity levels, the presence of dual diagnoses, and having issues that cut across system definitions and funding; and

6. Ultimately there needs to be ongoing regulatory reform and system re-design.

What do you think? We want this to be a living document. As you reflect on the challenges that face your organization, are there other areas that should be added? Please let me know.

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A MESSAGE FROM THE CEO

Annual Meeting

The recent annual meeting proved a great success; we want to thank the two speakers, Leslie Bonner and Ellen Bush, who assisted us in a review of some key issues relative to succession planning. The panel of (relatively) new – and recently retired – CEOs also shed a great deal of light on the process: Bill McCarthy (ret., Stairways), Angelo Stamoolis (ret., Community Counseling), Mary McGrath (ret., TrueNorth Wellness), Wendy Pardee (Skills), John Reardon (Cumberland Perry ARC), and Bill Parfitt (COMHAR). The discussion was informative and engaging.

Once again, we also want to thank Senator Pat Vance and DHS Executive Deputy Secretary Brendan Harris for excellent presentations, and an informative question and answer period, as they jointly filled in for DHS Secretary Ted Dallas who was called away at the last moment. The audience was impressed with their insight into a vast array of key issues. And finally, congratulations to those who were voted in as new RCPA Board members, as well as those who were confirmed for re-election and officer positions. This is a strong group of leaders who will help guide RCPA into the future and ensure that RCPA members continue to be well represented.

Richard S. Edley, PhD, President/CEO

This column represents my opinion, not necessarily that of the association.

RCPA welcomes its newest/re-elected officers and board members, and would like to thank all of the board members for their continued support. A special thanks to outgoing board members for their service with the association.

ONE YEAR TERM • July 1, 2015–June 30, 2016

NEW ELECTED OFFICERS
Chairperson
James Bobeck, President & CEO
Step-By-Step, Inc., Wilkes-Barre
Chairperson-Elect
Dennis Nebel, PsyD, Executive Director
Human Services Center, New Castle
Treasurer
Wendy Pardee, PhD, President & CEO
Skills of Central Pennsylvania, State College
Secretary
Susan Coyle, CEO
Chartiers Center, Bridgeville
Immediate Past Chairpersons
Susan Blue, President & CEO
Community Services Group, Mountville
Jeffrey Wilush, President & CEO
Horizon House, Inc., Philadelphia

THREE YEAR TERM • JULY 1, 2015–JUNE 30, 2018

NEW ELECTED BOARD MEMBERS
Charles Barber, Esq., CEO
Erie County Care Management, Inc., Erie
Noreen Fredrick, Regional Executive Director of Community Behavioral Health Network for WPIC, University of Pittsburgh Medical Center, Pittsburgh
Joseph Martz, President/CEO
NHS Human Services, Lafayette Hill
William Parfitt, CEO
COMHAR, Philadelphia

RE-ELECTED BOARD MEMBERS
Alan Hartl, CEO
Lenape Valley Foundation, Inc., Doylestown
Jack Poplar, President/CEO
Acadia, Inc., Lancaster

2015–2016 BOARD OF DIRECTORS

Jon Evans, President/CEO
Safe Harbor Behavioral Health, Erie
William Folks, Director of Community Integration and Strategic Planning
Eagleville Hospital, Eagleville
Melissa Pozza Gillis, CEO
Pinnacle Health Select Rehabilitation LLC d/b/a Helen M. Simpson Rehabilitation Hospital, Harrisburg
Susan Hartman, CEO
HealthSouth Nittany Valley Rehabilitation Hospital, Pleasant Gap
Mike Hopkins, President/CEO
Children’s Service Center of Wyoming Valley, Inc., Wilkes-Barre
Colleen Stuart, CEO
Venango Training & Development Center, Inc., Seneca
For additional information on legislative issues, contact RCPA at 717-364-3280. For copies of bills, call your local legislator, the House Document Room 717-787-5320, or visit the General Assembly’s Electronic Bill Room at www.legis.state.pa.us.

Become a Key Contact with Legislators

Additionally, RCPA will be implementing a Key Contact Program, which will become the cornerstone of RCPA advocacy. Whether you already have a relationship with a current Member of the General Assembly, or would like to develop a relationship with your State Senator or Representative, RCPA will provide the support needed to cultivate that relationship. RCPA’s success in Harrisburg is dependent on our ability to communicate our message about RCPA priorities to members of the State General Assembly. The involvement of RCPA members who serve as key contacts for their legislators will be a vital part of this process.

As a key contact, you will serve as RCPA liaison with a member(s) of the State General Assembly; RCPA will provide you with the tools necessary to develop and maintain these relationships. You will also receive periodic updates on RCPA legislative priorities, and positions on issues pending before the General Assembly, allowing you to keep your contacts informed and become a resource to their offices on health and human services issues.

RCPA also asks that you consider becoming a District Team Leader. With the assistance of RCPA staff, your primary responsibility will be coordinating advocacy activities with other RCPA key contact members in your district, such as attendance at town hall meetings, or a group appointment with an elected official in his/her district office to discuss RCPA legislative priorities. If you are interested in this important advocacy position, please email our Director of Government Affairs, Jack Phillips.

RCPA advocacy efforts are only as strong as the efforts of each RCPA member; the secret to advocacy success is key contacts. It is up to each of you to make a personal commitment to advocacy and build the legislative connections that count! Your commitment to the Key Contact Program will strengthen RCPA’s voice and influence with the State General Assembly.

NEW MEMBERS

FULL PROVIDER MEMBERS
Martha Lloyd Community Services
Troy, PA
William E. Miller, President/CEO
www.marthalloyd.org

Liberty Resources Home Choices
Philadelphia, PA
Fady Sahhar, CAO
www.libertyresources.org

FEDERAL NEWS BRIEFS

Senate Finance Committee Holds Hearing on Improving Care for Medicare Patients With Chronic Conditions

The United States Senate Finance Committee held a hearing, “A Pathway to Improving Care for Medicare Patients With Chronic Conditions,” on May 14. Those represented at the hearing included Patrick Conway, acting principal deputy administrator for the Centers for Medicare and Medicaid Services, and Mark Miller, executive director for the Medicare Payment Advisory Commission. The committee hearing recording, along with written testimony from the members and witnesses, are available online.
ICD-10 End-to-End Testing in July (Final Opportunity): Forms Accepted May 11–May 22

During the week of July 20-24, a final sample group of providers will have the opportunity to participate in ICD-10 end-to-end testing with Medicare Administrative Contractors (MACs) and the Common Electronic Data Interchange (CEDI) contractor. CMS is accepting additional July volunteers from May 11 through 22; approximately 850 volunteer submitters will be selected. This nationwide sample will yield meaningful results, since CMS intends to select a broad cross-section of provider, claim, and submitter types, including claims clearinghouses that submit claims for large numbers of providers. Note: Testers who are participating in the January and April end-to-end testing weeks are able to test again in July without re-applying.

To volunteer as a testing submitter:
- Volunteer forms are available on your MAC website
- Completed volunteer forms are due May 22
- CMS will review applications and select additional July testers
- The MACs and CEDI will notify the volunteers selected to test and provide them with the information needed for the testing by June 12

If selected, testers must be able to:
- Submit future-dated claims
- Provide valid National Provider Identifiers (NPIs), Provider Transaction Access Numbers (PTANs), and beneficiary Health Insurance Claim Numbers (HICNs) that will be used for test claims. This information will be needed by your MAC for set-up purposes by the deadline on your acceptance notice; testers will be dropped if information is not provided by the deadline.

Any issues identified during testing will be addressed prior to ICD-10 implementation. Educational materials will be developed for providers and submitters based on the testing results.

Participate in Final ICD-10 Acknowledgement Testing Week: June 1 through June 5

To assist providers in preparing for the transition to ICD-10, CMS offers acknowledgement testing for current direct submitters (providers and clearinghouses) to test with the MACs, and the Durable Medical Equipment (DME) MAC Common Electronic Data Interchange (CEDI) contractor, anytime up to the October 1 implementation date. Acknowledgement testing provides submitters access to real-time help desk support and allows CMS to analyze testing data. The final acknowledgement testing week will be June 1–5. Information is available on the MAC website or through your clearinghouse.

Various Resources Offered to Prepare Providers for ICD-10

The Centers for Medicare and Medicaid Services (CMS) continues to offer various resources and education efforts to assist providers in preparing for the ICD-10 implementation on October 1.

New ICD-10 Videos: Impact on Inpatient Hospital Payment and Medicare Testing Plans

The following videos were recorded from presentations at the CMS ICD-10 Coordination and Maintenance Committee on March 18:
- Estimating the Impact of the Transition to ICD-10 on Medicare Inpatient Hospital Payments 3/18/15 (29 minutes)
- Medicare’s Testing Plan for ICD-10 Success (7 minutes)
**FEDERAL NEWS BRIEFS**

National Provider Call to Focus on Medicare Shared Savings Program ACO Application Process

On June 9, from 2:30 - 4:00 pm, the Centers for Medicare and Medicaid Services will conduct a National Provider Call to provide an update to the Medicare Shared Savings Program Accountable Care Organization (ACO) application process for the performance period beginning January 1, 2016. The Medicare Shared Savings Program page has important information, dates, and materials on the application process.

CMS Releases Chronic Care Management FAQs and Fact Sheet

The Centers for Medicare and Medicaid Services (CMS) has released an updated Chronic Care Management (CCM) Services fact sheet and new frequently asked questions (FAQs). Both documents provide information about billing CCM services to the Physician Fee Schedule and Hospital Outpatient Prospective Payment System.

National Partnership to Improve Dementia Care and QAPI Call Scheduled for June 16

On June 16, the Centers for Medicare and Medicaid Services will hold a call on the National Partnership to Improve Dementia Care and Quality Assurance and Performance Improvement (QAPI). The target audience for the call is consumer and advocacy groups, nursing home providers, the surveyor community, prescribers, professional associations, and other interested stakeholders.

NASBO Releases 2015 Budget Processes in the States Report

On May 21, the National Association of State Budget Officers (NASBO) released the 2015 edition of Budget Processes in the States report. The report provides an analysis to demonstrate the diversity in state budgeting practices, including state-by-state comparative information, such as balanced budget requirements, executive branch authority, rainy day funds, revenue estimating procedures, and the use of performance data.

**STATE NEWS BRIEFS**

State to Convene Stakeholder Meetings on No Wrong Door Implementation Plan

The PA Link to Aging and Disability Resources is in the process of developing a three-year plan to implement a No Wrong Door (NWD) system in the state. A number of stakeholder meetings have been scheduled throughout the state, with the morning sessions focusing on public outreach, NWD structure, and provider engagement and the afternoon sessions focusing on outcome measurement, data gathering, and governance. For additional information, or to reserve a seat at a session, send an email to nwd@deringconsulting.com.

DHS Develops Fact Sheet on HCBS Final Rule

In an effort to comply with the Centers for Medicare and Medicaid Services (CMS) home and community-based services (HCBS) final rule, the Department of Human Services (DHS) has developed a fact sheet to answer some of the frequently asked questions that have been received. Members are encouraged to review DHS’s transition plan and share this information as needed. The transition plan outlines the steps Pennsylvania will take to work with providers, participants, and other stakeholders, to ensure compliance by 2019.

Applications Being Accepted for 2015 Innovation in Caregiving Award

Applications are now being accepted for the 2015 Innovation in Caregiving Award, which will be presented at the annual Benjamin Rose Institute on Aging Caregiving Conference on November 5. The award recognizes individuals who, in the course of caring for an older adult in a private home or residential setting, invented a device or technique that solves a caregiving challenge, or found a new application for an existing device or technique that supports caregiving of older adults and eases the burden on caregivers. Those assisting younger individuals with disabilities may apply for the award if their device or technique is helpful to the care of adults aged 60 and older. The application deadline is June 30.
FY 2016 IRF PPS Proposed Rule Released

On April 27, the Centers for Medicare and Medicaid Services (CMS) released and published the fiscal year (FY) 2016 inpatient rehabilitation facility prospective payment system (IRF PPS) proposed rule in the Federal Register. The proposed rule outlines the Medicare payment policies and rates for the IRF PPS and the IRF Quality Reporting Program (QRP). Some of the proposed changes include:

**Changes to the payment rates under the IRF PPS.** CMS is proposing to update the IRF PPS payments for FY 2016 to reflect an estimated 1.9 percent increase factor (reflecting a new IRF-specific market basket estimate of 2.7 percent, reduced by a 0.6 percentage point multi-factor productivity adjustment and a 0.2 percentage point reduction required by law).

**IRF-specific Market Basket.** For FY 2016, CMS is proposing an IRF-specific market basket to replace the Rehabilitation, Psychiatric and Long-Term Care (RPL) market basket.

**The Improving Medicare Post-Acute Care Transformation Act of 2014 (the “IMPACT” Act).** Added Section 1899B to the Social Security Act to require that IRFs report data on measures that satisfy domains specified under the IMPACT Act. These same measures are to be implemented in long-term care hospitals, IRFs, skilled nursing facilities, and home health agencies. This rule proposes to adopt measures that satisfy three of the quality domains required by the IMPACT Act in FY 2016: skin integrity and changes in skin integrity; functional status, cognitive function, and changes in function and cognitive function; and incidence of major falls. IRFs that fail to submit the required quality data to CMS will be subject to a two percentage point reduction to their applicable FY annual increase factor.

Adoption of four additional functional status quality measures, as well as proposing the previously finalized quality measure “All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities” (NQF #2502), in order to establish its newly NQF-endorsed status.

CMS will accept comments on the proposed rule until June 22. Members are encouraged to share comments, as well as potential impacts, from the proposals contained in the rule.

**Pilot Study Looks at Balance Rehabilitation Using Xbox Kinect With Elderly**

A recent research article, “Balance Rehabilitation using Xbox Kinect Among an Elderly Population: A Pilot Study,” published in Novel Physiotherapies, highlights the result of a study that assessed the efficacy of using Xbox Kinect as a single tool for balance training to assist with preventing falls in the elderly population. The results showed this tool could be a great adjunct to a multidisciplinary treatment to improve balance.

**CMS Provides FY 2016 Presumptive Compliance ICD-10 Codes**

The Centers for Medicare and Medicaid Services (CMS) has reminded inpatient rehabilitation facilities (IRFs) that changes to the presumptive compliance methodology that was finalized in the fiscal year 2014, and 2015 IRF prospective payment system (PPS) rules, are effective for compliance review periods beginning on or after October 1. The ICD-10 data files are available on the CMS Data Files web page.

**Therapy Caps Exceptions Process Extended Through CY 2017**

The Centers for Medicare and Medicaid Services (CMS) recently released preliminary guidance related to revisions to Medicare law for therapy caps through Section 202 of the Medicare Access and CHIP Reauthorization Act (MACRA) of 2015. MACRA extended the therapy caps exceptions process through December, 2017 and modified the requirement for manual medical review for services over the $3,700 therapy thresholds. Additional information is available on the CMS therapy services web page.
Bill Introduced to Protect Student Athletes From Concussions

Congressman DeSaulnier (D-Calif.) introduced H.R. 2062, Protecting Student Athletes from Concussions Act of 2015. The bill would promote state requirements for local educational agencies, and public elementary and secondary schools, relating to the prevention and treatment of concussions suffered by students. The bill was referred to the House Education and the Workforce Committee. Beginning in the fiscal year of 2017, as a condition of receiving funds under the Elementary and Secondary Education Act, a state shall, no later than July 1 of the preceding fiscal year, certify to the Secretary of Education that the state has in effect and is enforcing a law or regulation that establishes the following requirements:

- Must have a local educational agency concussion safety and management plan;
- Post information on concussions on the grounds of each public school and the school’s website;
- Have a plan to respond to concussions;
- Have a plan for the student to return to athletics after a concussion; and
- Have a plan for the student to return to academics after a concussion.

CDC Releases Updated Concussion Fact Sheet

The Centers for Disease Control and Prevention (CDC) released an updated fact sheet to outline CDC’s proposed work in response to the 2013 Institute of Medicine recommendations, as aligned with the proposed $5 million request in the Fiscal Year 2016 President’s Budget. To read the fact sheet, and to learn more about CDC’s work in TBI, visit the web page.

BIAA State Advocacy Toolkit Available

The Brain Injury Association of America (BIAA), and the BIAA Business Council, have assembled a state advocacy toolkit to assist state level advocates in advancing access to, and coverage of, brain injury (BI) treatment, rehabilitation, and related services. With implementation of the Affordable Care Act (ACA), there are annual opportunities to raise awareness of the importance of BI services and to enhance coverage of these services under private insurance and Medicaid programs. This toolkit is intended to serve as an aid and a resource to state level advocates, both seasoned and new to the world of advocacy. If you are an advocate, or are considering advocacy for the first time, this toolkit will provide you with step-by-step instructions for how to make the greatest impact in your state through BI-focused advocacy.

International Conference on Pediatric Abusive Head Trauma

The fifth Penn State Hershey International Conference on Pediatric Abusive Head Trauma is scheduled for July 9-10 in Park City, Utah. The conference provides a unique opportunity to bring together clinicians, social workers, researchers, forensic scientists, engineers, and others from a wide range of disciplines to share their research efforts, discuss research challenges and controversies in this field, and develop cross-disciplinary collaborations to further advance our understanding of abusive head injuries. The only international event of its type, this conference will be scientific, peer-reviewed, and medically focused. Health care professionals are encouraged to consider current research and “pearls of practice” that would be appropriate for abstract submission.
Pennsylvania Takes Next Steps in Collaborative and Integrated Care

This spring saw the state’s Collaborative Care Summit, followed by the convening of the state’s Patient Centered Medical Home Advisory Council. The summit was planned by representatives from several state departments, the Psychiatric Leadership Council, Psychiatric Society, Rehabilitation and Community Providers Association, and representatives of this Learning Community. This event brought together a group described by a participant as “an all-star cast of experienced professionals on the topic of collaborative care.” The summit achieved its goal of launching the state’s policy leadership effort by sharing valid, useful, and timely information in the area of collaborative behavioral and primary health care to an audience of over 300.

This spring also saw the first two meetings of the Patient Centered Medical Home Advisory Council. The council was convened by Dr. David Kelley, and is composed of approximately 25 members, representing physical health, behavioral health, advanced practice nurses, pharmacy practitioners, system administrators, faith-based organizations, consumers, and provider organizations, including organization representatives from all the founders and leaders of the Learning Community.

Psychiatrists Unveil Plain English Guide to DSM

In the process of improving our mental health care system, the role of patients, friends, and families is sometimes overlooked. The American Psychiatric Association is releasing a first-of-its-kind book to decipher the Diagnostic and Statistical Manual of Mental Disorders – a guide for mental health providers, also used to determine insurance coverage. Understanding Mental Disorders: Your Guide to DSM-5, includes in-depth explanations of risk factors, symptoms and symptom management, treatment options, and success stories. See full article.

D&A Regulations Review Continues

Two work groups are meeting to review drug and alcohol regulations. One is reviewing medical assistance drug and alcohol outpatient regulations and the other is reviewing the Department of Drug and Alcohol Programs (DDAP) staffing regulations. Reviewing outdated drug and alcohol regulations for submission to DDAP and the Department of Human Services is priority number one for the Drug and Alcohol Committee. RCPA is grateful to the members that have committed time and energy to this grueling job. RCPA is also grateful to Gateway Rehabilitation for hosting all of these meetings. For additional information, contact Lynn Cooper.

ProAct Recovery Walks! 2015
Penn’s Landing, Philadelphia
Saturday, September 19
Register Free . Form a Team . Volunteer . Donate . Sponsor
Join the Honor Guard (living in recovery 10+ years)
click link recoverywalks.org
Hope Springs Farm in Hershey is a unique and innovative day program for individuals with intellectual and developmental disabilities. Participants are called “growers” – their days are filled with friendship and a wide variety of community inclusive activities. These daily activities include learning about growing fruits and vegetables and how to prepare meals with the crops they grow. A variety of animals live at the farm and are cared for by the “growers.” Community activities include volunteering at Meals on Wheels and the Food Bank. Other activities including cooking and craft projects, educational, and recreational activities such as tours of Chocolate World, Utz Snack Factor, and local TV stations.

On May 11, RCPA Policy Specialist Linda Drummond visited RCPA member Hope Springs Farm with ODP Deputy Secretary Steve Suroviec and ODP Central Region Program Manager John Witt. The tour was provided by Hope Springs Founder Nina Rovner and Executive Director Jim Gainer. Mrs. Rovner and her husband, Neil, purchased and developed this adult training facility for their daughter, Miriam. This program currently has over 30 participants.

Hope Springs Farm in Hershey is a unique and innovative day program for individuals with intellectual and developmental disabilities. Participants are called “growers” – their days are filled with friendship and a wide variety of community inclusive activities. These daily activities include learning about growing fruits and vegetables and how to prepare meals with the crops they grow. A variety of animals live at the farm and are cared for by the “growers.” Community activities include volunteering at Meals on Wheels and the Food Bank. Other activities including cooking and craft projects, educational, and recreational activities such as tours of Chocolate World, Utz Snack Factor, and local TV stations.

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DHS Provider Enrollment

The Department of Human Services (DHS) is working on the issue of the provider enrollment backlog and the time-consuming, paper-intensive manual process. Due to the changes required by the Affordable Care Act, if a provider enrolled on or before March 25, 2011, they must be revalidated by March 24, 2016. If the provider enrolled after March 25, 2011, the revalidation must occur on or before five years from the date of initial enrollment.

DHS has launched the following initiatives to address some of the issues:

- **Electronic Enrollment**: DHS expects to have a new, electronic enrollment web portal available in the fall of 2015; this will greatly reduce the need for the paper application.

- **Standardization of Policies and Procedures**: DHS is developing a department-wide approach to provider enrollment to help reduce the variations across program offices that cause confusion. The process will be completed by October 31, 2015, and will include standardization of policies and procedures for both DHS staff and providers.

- **Staffing**: By May, DHS will add nine staff to help process provider enrollment applications and reduce backlogs.

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The Office of Developmental Programs has released the following information:

- **Announcement #030-15**: New Required Training: The Outcome Section of the ISP: Better Outcomes, Better Lives; This required training for SCOs and AEs is also recommended for provider staff

- **Reissued: Informational Packet #031-15**: Amendments to 55 PA Code 6000, ODP Statement of Policy, Subchapter Q as result of Adult Protective Services

- **Announcement #032-15**: Risk Mitigation Training for SCOs, AEs and Providers

- **Announcement #033-15**: Availability of ODP’s Consolidated, P/FDS and Adult Autism Waiver Amendments and Accompanying Transition Plans submitted to CMS

- **Informational Memo #034-15**: Helpful Resources from the PA Department of Transportation; Information regarding the Yellow Dot Program

- **Informational Memo #035-15**: New ODP Specialty Codes 508 and 509; Effective July 1, new codes will be added for providers to use; #508 Behavioral Support and #509 Supports Broker Services

- **Informational Memo #036-15**: Update to Informational Packet 154-11: ICD-10 Compliance Date Changed to October 1, 2015; Providers to continue billing using ICD-09 diagnosis code for dates of service up to and including September 30

- **Announcement #037-15**: Intellectual Disability Supports Coordination New Required Training

- **Informational Memo #038-15**: Implementation Instructions for Providers, Including SCOs on Quality Management Plans

- **Announcement #039-15**: Fourth Waiver Amendments Submitted to CMS for ODP Consolidated and Person/Family Directed Support Waivers Effective July 1, 2015

- **Training Announcement #040-15**: New Required Training for SCs and AEs: CMS Final Rule for HCBS Waivers: An Overview

- **Bulletin #00-15-01**: Individual Support Plans (ISP) establishes the requirements for the ISP. Attachments to the bulletin include the ISP Manual with information regarding the standardized processes for preparing, documenting, implementing, and monitoring the ISPs
Adult Protective Services

The Department of Human Services (DHS) has released information regarding the reporting of suspected cases of abuse, neglect, exploitation, or abandonment, as required by the Adult Protective Services (APS) law. Information about APS, including the forms to be used by mandated reporters, may be found on the department’s website; select the “Report Abuse” icon on the left. The DHS website also provides other resources, including a webinar explaining APS and how to handle mandatory reports. Questions may be submitted via email or by calling 717-736-7116. The statewide Protective Services Hotline at 800-490-8505 is used for reporting cases. The Disability Rights Network also has a fact sheet on the APS law.

WIOA Proposed Rulemaking

The US Departments of Labor and Education have released five notices of proposed rulemaking regarding the Workforce Innovation and Opportunity Act (WIOA). These announcements are open for public inspection.

The Notices of Proposed Rulemaking are published in the Federal Register, and the 60-day public comment period will end on June 15. Written comments may be submitted online.

LEAD Center is offering two new WIOA Policy Briefs:
- Disability Perspective Title I of WIOA
- Description of Title IV of WIOA and State Vocational Rehabilitation Programs

LEAD Center is also offering two upcoming WIOA webinars:
- June 24: WIOA Youth Services
- September 24: Section 188: Nondiscrimination Provisions of WIOA

This center has archived several webinars regarding WIOA, which include: WIOA and the Unified State Planning Process and WIOA From a Disability Perspective.

New Hampshire Bans Subminimum Wage

New Hampshire is the first state to ban subminimum wages for people with disabilities. Since 1930, federal law has allowed subminimum wages to be paid by employers. Several years ago, the National Council on Disability recommended that this law be phased out and new limits placed on who is eligible for employment at less than minimum wage. Two related articles:
- New Hampshire Public Radio
- DisabilityScoop

QUOTE (hand-picked by your editor)

“An Editor becomes kind of your mother. You expect love and encouragement from an Editor.”

— Jackie Kennedy
Act 62 Work Group Reconvened

At the direction of DHS Secretary Ted Dallas, the state Departments of Insurance, State, and Human Services, have begun to meet with representatives of RCPA, the Health Law Project, families, and managed care organizations, to revisit Act 62. The first meeting of the Act 62 External Work Group was held on May 18, after nearly four years. The work group focused on efforts to update information for families on the grievance and appeal process for commercial insurance, with the goal of increasing the level of non-Medicaid support for service delivery as originally intended by the Autism Insurance Act. The group also agreed that there was a growing need to address the “unintended consequence” of the Behavior Specialist Mandate that has now left the provider system facing a growing crisis in maintaining service capacity.

Transitioning to Summer

The Autism Service Education Resource and Training Center has offered some valuable suggestions for the summer season. As school programs end, changes in routines often occur. Whether attending a summer camp, participating in an extended school year program, or taking a vacation, there are steps you can take to help ease the transition to new summer-time routines for individuals with autism.

- **Visit new locations in advance.** If possible, tour new locations in advance to become familiar with the new environments. Check with the attractions to see if they offer social stories or virtual tours online to help prepare.

- **Transition slowly.** If your new routine will involve different bedtimes or wake times, begin implementing the changes a few weeks in advance. Move bedtimes and wake times by 10-15 minutes every few days to smoothly transition to the new timing.

- **Visual schedules.** Pictures are one way to add predictability to new routines or anticipation for activities. Go over the day’s routine using pictures to help the individual know what to expect. During activities, use the pictures to help the individual prepare for next steps. Keep the pictures in a place where they can be seen and are accessible at all times. Having multiple prints of the same picture on hand will also be helpful in scheduling. If the individual has calendar skills, prepare for changes or upcoming events by placing vacations, events, or day trips on their calendar.

- **Educate others.** Provide any new summer support staff with important information about your child in that particular setting and how to best handle changes from previous experience, and educate them as much as possible about the individual’s typical routine.

- **Incorporate typical routines into the new schedule.** Even though times, destinations, bedtimes, and travel methods change with a new summer routine, find creative ways to keep consistency with the individual’s typical routine.

Resources for Providers and Families at CDC

Autism spectrum disorder (ASD) is a group of developmental disabilities that can cause significant social, communication, and behavioral challenges. The Centers for Disease Prevention and Control (CDC) is committed to providing essential data on ASD, the search for factors that put children at risk, possible causes, and the development of resources that help identify children with ASD as early as possible. Whether a long time practitioner, family member, or interested layperson, the resources and information available at the [CDC Autism website](https://www.cdc.gov/autism) are valuable and warrant a close look – or a return visit – to see what’s new.

**ASD, Improvement Beyond the Label, But Not the Service Needs**

Dr. Lisa Shulman, a developmental pediatrician at the Albert Einstein College of Medicine, reported on a study that found that 7 percent of children who received an early diagnosis experienced a resolution of autistic symptoms over time. New research has shown that while a significant number of children diagnosed with autism lose the label as they respond to interventions, a majority continue to face other issues, even though they’re no longer on the spectrum. Dr. Shulman’s study of 569 children diagnosed with autism as toddlers found that 38 no longer met the criteria for the developmental disorder when they were re-evaluated four years later. Researchers saw improvements in socialization and cognitive functioning. However, all but three children no longer on the spectrum continued to struggle with learning, emotional, or behavioral issues. In a health, behavioral health, and special education system where access to services is grounded in diagnostic and other criteria, the study’s findings continue to raise concerns for parents, educators, and community providers about a range of continuity of care challenges they face.
National Council’s Children’s Network

In April, scores of Pennsylvania’s community behavioral health providers gathered at the National Council Conference to hear Colin Powell, Patrick Kennedy, Dale Jarvis, and other leading policymakers and practitioners, share their vision of the future for health care and behavioral health care in the nation. For the sixth consecutive year, children’s behavioral health providers came together for their annual roundtable discussion. Pennsylvania’s RCPA members were once again key contributors to the conversation. Just as here in Pennsylvania, the national focus was on:

- Engaging families and supporting parents as peers;
- Primary care as the first locus of engagement;
- Intergenerational cycles of poor health and trauma; and
- Supporting prevention, integrated mental health services with primary health care, education, and other children’s services.

Children’s Committee Will Focus on the Future

The June 9 meeting of the RCPA Children’s Committee will open with updated information about the implementation of Child Protective Service Laws as they impact behavioral health, child welfare, and education. The meeting will also provide a forum for discussion regarding the rapidly growing pace of new initiatives and future developments in the full range of child serving programs, with updates on how RCPA is influencing change in Pennsylvania. Join your committee’s meeting via webcast or, better yet, come to Harrisburg to network with colleagues and pick up your free youth suicide prevention posters and DVDs.

Youth Suicide Prevention PSA Winners Announced

The Pennsylvania Youth Suicide Prevention Initiative (PAYSPI) has announced the winners of the third annual contest for high school students to create public service announcements (PSAs) on suicide prevention. Nearly 50 entries were submitted by high school students across the state in four categories: posters, 30- and 60-second videos, and 30-second radio spots. The winning and honorable mention entries, as well as other noteworthy submissions, can be viewed here. Copies of several of the posters and DVDs of the PSAs will be available to our members attending the June 9 Children’s Committee meeting in Harrisburg. Suicide prevention events will also be held at Philadelphia Phillies and Harrisburg Senators baseball games as listed below.

Monthly Columns Address Timely Topics on Child Mental Health

The Office of Mental Health and Substance Abuse Services Bureau of Children’s Behavioral Health has two prominent child psychiatrists as consultants to the bureau. Both have wide-ranging expertise and experience in public sector mental health and private practice, but each has his own particular areas of interest. Dr. Gordon Hodas has written and trained widely in trauma-informed care, while Dr. John Biever has worked extensively on attachment issues, especially in young children. As part of their service to the children’s bureau, Dr. Hodas and Dr. Biever each write a monthly “Children’s Mental Health Matters” column to support children, adolescents, and their families, and to help children’s mental health practitioners be more empowering.

Advance Suicide Prevention at the Ball Park

RCPA members, families, and central Pennsylvania communities can support suicide prevention by attending the second annual Suicide Prevention Night at the Ballpark. The Pennsylvania Youth Suicide Prevention Initiative (PAYSPI), and the Pennsylvania Adult/Older Adult Suicide Prevention Coalition, have partnered with the Harrisburg Senators for a special Suicide Prevention Night Friday, June 12.

RCPA members, families, and southeast region communities can show their support for suicide prevention awareness by attending the Philadelphia Phillies Suicide Prevention Night Friday, June 26.

To learn more about how you can support suicide prevention in Pennsylvania by attending these games and purchasing your discount tickets, please visit www.payspi.org and select the baseball slider.
Bullying a Greater MH Threat than Maltreatment

A new study shows that children who have been bullied by peers suffer worse in the longer term than those who have been maltreated by adults. The research is led by Professor Dieter Wolke from the Warwick Department of Psychology and Warwick Medical School. Professor Wolke and his team wanted to examine whether long-term mental health issues among victims of bullying were related to having been maltreated by adults as well. Data from 4,026 participants in the United Kingdom, and 1,273 participants from the United States, created the basis for the study. Professor Wolke noted, “The mental health outcomes we were looking for included anxiety, depression or suicidal tendencies. Our results showed those who were bullied were more likely to suffer from mental health problems than those who were maltreated… Being bullied is not a harmless rite of passage or an inevitable part of growing up; it has serious long-term consequences. It is important for schools, health services and other agencies to work together to reduce bullying and the adverse effects related to it.” The research was recently presented at the Pediatric Academic Societies’ annual meeting in San Diego.

CPSL Clearance and Training

June 30 is the deadline for child-serving and children-involved organizations that are licensed by the Department of Human Services (DHS) to have their staff and consultants trained as mandated reporters with all the necessary clearances on file. Details on the new Child Protective Services Laws, clearance requirements, training, and other resources are all available online. In May, DHS and ChildLine were processing clearances within 3-5 days for most applications, a great improvement, having added ten permanent positions to the clearance processing unit. At last report, approximately 300,000 people were taking advantage of the online mandated reporter training.

September PCIT Conference in Pittsburgh

The Parent Child Intervention Therapy (PCIT) International Convention will be held in Pittsburgh, September 30 to October 2, with the theme of Getting to Scale: Building Capacity and Infrastructure. The steering committee for the “PCIT Across PA” grant project recently met in State College. Staff members for the project reported:

- PCIT services are now available in 60 counties;
- 100 provider agencies offer PCIT statewide; and
- 238 clinicians have been trained in PCIT. This number does not include additional clinicians who have been trained by staff within their own agencies.

Most of this growth in the availability of PCIT, which is an evidence-based mental health intervention, has occurred in the past five years. Significant discussion among steering committee members focused on how to create the kind of infrastructure that will sustain PCIT’s continued growth, and provide ongoing training to maintain the intervention’s integrity after the grant period has ended in 2017.
IDD Committee
The April 16 Intellectual and Developmental Disabilities Committee included discussion with Karen Kroh, ODP’s contractor, to coordinate the Regulations Revisions Work Group, which is developing Chapter 6100 Regulations for implementation next year to replace the current Chapter 51 Regulations. The committee has been meeting every other week and is made up of approximately 43 members. RCPA President & CEO Richard Edley is a member of this work group, as well as several other providers, family advocates, and four counties (Erie, Fayette, Dauphin, and Chester). Regulations revisions will include addressing the ODP Home and Community-Based Consolidated, Person/Family-Directed Supports, and Autism waivers. The target date for finalization of the new regulations is August, 2016, with the effective dates being December, 2016 through July, 2018.

Department of Human Services Secretary Ted Dallas shared his views and emphasis for his department:
- Partnership model with providers, agencies, and stakeholders;
- Community services and supports;
- Employment First;
- Focus on quality and outcomes to determine value of quality and services; and
- Provider enrollment should be automated by fall of 2015.

Issues he’s aware of and working for resolution:
- Provider enrollment delays in HCSIS; DHS is working on a solution for fall of 2015 to streamline and expedite this process
- System redundancy and excessive monitoring; recommendations to reduce and streamline
- Recertification of all service locations in PROMISe needs to be completed by 2016 and the department is working on streamlining the process to accommodate the anticipated need.

ODP Deputy Secretary Steve Suroviec provided an overview on the providers and ODP settlement agreement specific to residential provider payments and policies. These include:
- Increased funding for current fiscal year;
- Revisions to Vacancy Factor Exceptions Policy;
- Moving to 96% Vacancy Factor; and
- Preparing waiver amendment on these changes to send to Centers for Medicare and Medicaid Services for approval effective July 1.

On the issue of the lengthy provider approval process, ODP has asked the Office of Medical Assistance Programs to train ODP staff to help speed up the qualification and approval processes which have been taking up to five months.

ODP’s Employment Lead Diane Cashman provided information regarding the state’s continued emphasis on employment opportunities for individuals with disabilities. Currently, ODP is working on an Executive Order with multiple departments. Pennsylvania also has a federal Employment First State Leadership Mentoring grant.

SCO Subcommittee
The April 16 SCO Subcommittee included discussion with staff from the Office of Developmental Programs (ODP), regarding a variety of issues. ODP staff included Jen Fraker, program representative; Sonya Hipple, program specialist; and TaWanda Jackson, provider monitoring lead.

Topics addressed:
- SCO oversight issues and concerns: Can self-assessments be eliminated since ODP does on-site assessments which are done annually. ODP will do an inventory of SCOs and Administrative Entities (AE) for recommendations on policies and procedures which could be changed or eliminated to reduce time-consuming practices.
- Jen Fraker asked RCPA members to share comments with Linda Drummond about what parts of the oversight process are useful, and why, and which parts could be eliminated and why.
- Intake/eligibility requirements are becoming increasingly difficult to meet, due to conflict with schools vs ODP and autism vs intellectual disability. SCOs and AEs need to specifically request IQ tests as part of the intake process. School district classifications do not require IQ testing for students who may have autism, even if they may also have an intellectual disability. Fraker will work on these eligibility rules.

RCPA Government Affairs Director Jack Phillips provided an update on relevant legislation and issues:
- House Bill 250: Increases minimum wage to $10.10 per hour; this will have an impact on waiver
funded providers, due to their staff salaries being paid by the state/federal Medicaid funds; therefore, if passed, this legislation would require state and federal governments to increase the funding to waiver providers to cover these increased costs.

- HB400 and SB200 are based on the federal Workforce Innovations and Opportunities Act, which requires transition-age students with disabilities to be funded by the state’s vocational rehabilitation agency to provide supported employment opportunities first.

- HB444 and HB583 are based on the federal ABLE legislation, which would allow special accounts for individuals with disabilities to have $14,000 per year donated to the accounts for a maximum of $100,000, without impacting the individuals’ Supplemental Security Income or Medical Assistance.

Vocational Rehabilitation Subcommittee

The April 16 Vocational Rehabilitation Subcommittee meeting featured updates on legislation by RCPA and conversation with the Disability Rights Network’s (DRN) executive director.

On the federal legislative level, RCPA President & CEO Richard Edley and Government Affairs Director Jack Phillips met with several congressmen, regarding issues related to sheltered workshops continuation and subminimum wage elimination. HR188, subminimum wage elimination legislation, only has a 3% chance of moving out of committee.

Committee discussion with DRN’s Peri Jude Radecic focused on issues regarding sheltered workshops and vocational training options for those with intellectual disability and autism. DRN is visiting workshops and state institution workshops to enforce waiver regulations implementation. They also feel the federal rule changes may help the development of more opportunities for individuals. DRN is on record as wanting to close sheltered workshops, leaving us the challenge of identifying alternate ways to serve the individuals who are currently receiving these services.

Committee Co-chair Colleen Stuart shared that many of RCPA’s vocational rehabilitation providers offer a whole array of employment, pre-vocational, and vocational services. Also, many parents share concerns regarding daily options for their children which allow the parents to maintain their jobs. Transportation is also a barrier to competitive employment options, especially in rural areas.