People often ask, “What is government affairs?” The short answer is that it is an educational process mixed in with a liberal amount of advocacy. Simply put, it is an essential component of any organization that is subject to government regulations.

At its core, government affairs is an educational process – educating our members about the governmental process; educating officials about the issues important to our members; and educating government and business leaders, as well as the public, about the potential consequences of legislation and/or regulations.

Legislation and/or regulations have a profound impact on health and human services providers; therefore, my job as director of government affairs is to explain to elected and appointed officials the complexities of running an organization in the health and human services arena. So educating these officials about the potential effects that legislation or regulations have on those service providers is an essential part of the legislative process.

Without an understanding of the legislative process, opportunities to shape the outcome of legislation that affects health and human services can be missed, so part of my job is to educate members about the legislative process and identify and monitor important issues – issues that affect you, our members. Once these issues are identified, I reach out to elected and appointed officials and offer advice, in an effort to positively affect the final composition of legislation and/or regulation. Ultimately, RCPA’s goal in the Government Affairs Division is to make a case for our members in the public policy arena.

Over the past year, RCPA has lobbied the governor’s office and members of the General Assembly with regard to the state budget. We were also involved in getting SB 487 signed into law by the governor. SB 487 (now Act 39 of 2015) prohibits multiple copayments for licensed physical and occupational therapy services covered under an insured person’s health benefit plan. RCPA, along with many of our medical rehabilitation members, met with various legislators and leadership expressing support for this very important piece of legislation. Without this legislation, patients were required to pay multiple insurance copayments, which sometimes limited or even prevented them from receiving the amount of care that they absolutely required. SB 487 does not eliminate copayments; it simply prohibits burdening patients who require different and specific therapy services with copayments for each and every session they require.

We have been working with Rep. Dan Miller (D-Allegheny) to amend Act 62 of 2008, known as the “Autism Insurance Act.” The amendment will:
GOVERNMENT AFFAIRS DIVISION

Continued from page 1

- Allow licensed behavior specialists to supervise non-licensed, graduate-level clinicians providing autism services while they obtain the 1,000 required hours of clinical experience to apply for licensure.
- Establish a temporary practice license that could be granted to graduate-level clinicians as they obtain their service hours under the supervision of licensed behavior specialists, licensed physicians, and licensed psychologists.
- Amend the educational requirements of a behavior specialist to recognize those individuals who are board certified behavioral analysts.

A brief overview of some of the other legislative policy issues that RCPA has been monitoring and/or working on are as follows:

- HB 400 – Act providing for the Work Experience for High School Students with Disabilities Act and imposing duties on the Office of Vocational Rehabilitation.
- HB 221 – Training for law enforcement and minor judiciary to recognize individuals suffering from mental health conditions or intellectual disability (now Act 25 of 2015).
- HB 1319 & SB 879 – Enabling Federal ABLE Legislation
- HB 250 – Amends the Minimum Wage Act further, providing for definitions; minimum wage rates; tipped employees; minimum wage advisory board, enforcement & rules & regulations, penalties, civil actions & preemption; and making editorial changes.
- WIOA federal legislation
- Sub-minimum wage issue

The above are just some of the issues RCPA has worked on over the past year. RCPA monitors over 130 pieces of legislation and over 125 co-sponsorship memos, and that list continues to grow.

Last, but certainly not least, RCPA’s government affairs program cannot be successful without members’ assistance. Members are encouraged to notify me or policy staff when they have an issue or hear about an issue that may arise. We need members to actively take part in the legislative process, whether through an RCPA committee meeting, coming to legislative or state agency meetings in Harrisburg, or meeting with elected or appointed officials in your home areas. RCPA is only as successful as its grassroots efforts, so we need YOU!! For additional information, or questions about the RCPA Government Affairs program, please contact Jack Phillips.
BH-MCOs, Oversights, and RCPA Continue Search for Operational Compatibilities

As previously reported, RCPA invited the HealthChoices Behavioral Health Managed Care Organizations (BH-MCOs) and oversight bodies to participate in a statewide task force. The purpose of this task force is to work to identify any operational compatibilities among the BH-MCOs that exist or can be created, in areas such as credentialing, authorizations, procedure codes, billing, and forms. The BH-MCO/RCPA task force will soon have its first “product.” The task force has developed a uniform recredentialing process and is in the final stages of BH-MCO review. The new draft process will be shared with providers and OMHSAS soon. The next meeting of the task force will take place on Wednesday, January 20.

RCPA Congratulates PA Counseling Services on New Center

Pennsylvania Counseling Services cut the ribbon for their new treatment center on Tuesday, November 24, 2015. The center is the first of its kind in Harrisburg. It offers mental health counseling, addiction treatment, and positive parenting programs. RCPA President & CEO Richard Edley was on hand to participate in the celebration.
Annual Golf Outing

Please join us for RCPA PAC’s third annual golf outing on the beautiful West Course at the Hershey Country Club on Tuesday, September 27. Buffet lunch will begin at 11:00 am in the Weitzel Room, putting contest at 12:45 pm, and shotgun start at 1:00 pm.

The RPCA PAC raises money to support campaigns of state legislators who work tirelessly on issues that benefit mental health, intellectual disabilities, addictive disease treatment and services, brain injuries, medical and vocational rehabilitation, and other related human services. The funds raised through RPCA PAC can make the difference between a win and a loss on an issue or assist in making a new ally. More information will follow, but if you have questions or suggestions regarding our 2016 RPCA PAC Golf Outing, please contact Jack Phillips.

RCPA Capitol Day

Tuesday, April 12
Harrisburg, PA

RCPA will be hosting our 2016 Capitol Day on Tuesday, April 12. During the day, RCPA will hold a press conference in the Main Rotunda and members will visit key legislators to discuss the state budget, legislation, and regulations that affect their day-to-day activities. More information will follow, but if you have questions or suggestions regarding our 2016 Capitol Day, please contact Jack Phillips.

OLTL Revises PASRR Forms

The Office of Long-Term Living (OLTL) has made changes to the Preadmission Screening Resident Review (PASRR) Level I (MA 376) and Level II (MA 376.2) forms based on recommendations from the Centers for Medicare and Medicaid Services. The revised forms are posted with the OLTL bulletins. They became effective on January 1.

InnovaTel Telepsychiatry, LLC: A New Business Model Helping Psychiatrists Serve Rural & Underserved Populations Remotely (free subscription needed to read article)

CATA Welcomes Pardee to Board of Directors

The Centre Area Transportation Authority (CATA) welcomed Dr. Wendy Pardee to its Board of Directors as the newly-appointed Patton Township representative.

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.
CMS Expands Quality Data on Physician Compare and Hospital Compare

The Centers for Medicare and Medicaid Services (CMS) recently announced that it has expanded the quality performance data on both the Physician Compare and Hospital Compare websites. On Physician Compare, information can be obtained on group practices, accountable care organizations, and for the first time, individual health care professionals. Hospital Compare includes information on more than 100 quality measures and over 4,000 hospitals, and includes new data and several new measures.

MACPAC Releases 2015 Medicaid Data Book

The Medicaid and CHIP Payment and Access Commission (MACPAC) released the first edition of MACStats, a comprehensive source for Medicaid and the State Children’s Health Insurance Program (CHIP) data. The information contained in the data book was previously included by MACPAC in its semiannual reports to Congress. The December 2015 data book includes an overview of key statistics on Medicaid and CHIP; trends in Medicaid; Medicaid and CHIP enrollment and spending, with information on benefits, managed care, and program administration; Medicaid and CHIP eligibility; and measures of access to care. The book also includes Medicaid spending as a share of state budgets from the NASBO State Expenditure Report.

HHS Releases Semiannual Regulatory Agenda

The Department of Health and Human Services (HHS) released its semiannual regulatory agenda in the December 15, 2015 Federal Register. The Regulatory Flexibility Act of 1980 and Executive Order (E.O.) 12866 require the semiannual issuance of an inventory of rulemaking actions under development throughout HHS, offering for public review summarized information about forthcoming regulatory actions.

2016 Premiums and Deductibles for Medicare Parts A & B Announced by CMS

On November 10 the Centers for Medicare & Medicaid Services (CMS) announced the 2016 premiums and deductibles for the Medicare inpatient hospital (Part A) and physician and outpatient hospital services (Part B) programs. Medicare Part A covers inpatient hospital, including care provided in inpatient rehabilitation hospitals and units, skilled nursing facilities, and some home health care services.
CMS Extends NHSN Data Submission Deadline for IRFs

On December 11, 2015, the Centers for Medicare and Medicaid Services (CMS) posted an update to the inpatient rehabilitation facility (IRF) quality reporting spotlight & announcements page of its website, regarding an extension of the IRF quality reporting program data submission. CMS made the decision to extend the National Healthcare Safety Network (NHSN) data submission deadline for IRF providers until Monday, February 15. The extension also applies to the submission deadline to the calendar year 2015 quarters 1 and 2, fiscal year 2017 payment determination. In addition, the extension applies to the submission deadlines for assessment data for the quality reporting program.

Members are encouraged to run the applicable CMS output reports within their facility prior to each quarterly reporting deadline. Detailed guidance on how to run and interpret these reports, and additional information, are posted on the Centers for Disease Control and Prevention (CDC) website. Additionally, once these reporting deadlines have passed, members should run the advanced analysis reports within NHSN to view when each data element was first entered and last modified, to determine whether all data were complete at the time of the reporting deadline. Additional information on how to run and interpret these reports is provided by the CDC/NHSN. Questions on the reports within NHSN should be directed to the NHSN help desk. Additional questions can be directed to the CMS help desk.

State Board of Physical Therapy Issues Draft Rulemakings; Comments Requested

Pursuant to Executive Order 1996-1, the State Board of Physical Therapy has requested member comments and suggestions on two draft rulemakings. The first draft rulemaking, 16A-6518-Foreign Trained Evaluation, would amend the board’s regulations so that a foreign-trained applicant would be required to submit an evaluation showing that the applicant’s training was equivalent to what is required in a program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) — the accrediting body for United States programs — rather than program contents specified in the regulations.

The second draft rulemaking, 16A-6519-Student in Master’s Program Statement of Policy, is for a statement of policy that would make clear that, for purposes of the exception to the licensure requirement for physical therapy students, the term “Board-approved School” includes all physical therapy programs at a school that has a program accredited by CAPTE, as CAPTE accredits only pre-licensure programs. The State Board of Physical Therapy welcomes comments on these draft rulemakings. Comments are due by Friday, January 15, and should be submitted via email. Please specify rulemaking 16A-6518 (foreign-trained applicant evaluation) or 16A-6519 (student in master’s program) as appropriate on your comments.

CMS Issues RFI to Assist in Design & Development of Survey for Care in IRFs

The Centers for Medicare and Medicaid Services (CMS) published a Request for Information (RFI) in the November 20, 2015 Federal Register, to assist in the design and development of a survey regarding patient and family member experiences with care received in inpatient rehabilitation facilities (IRFs). The surveys will most likely become part of the Consumer Assessment of Healthcare Providers and Systems Surveys that are used to assess other providers, including hospitals, skilled nursing facilities, and physicians. Comments on the RFI must be submitted by Tuesday, January 19.

MedPAC Public Meeting on IRF Payment Updates & Other Issues

The Medicare Payment Advisory Commission (MedPAC) conducted its latest public meeting on December 10–11, 2015 in Washington, DC. The commission meets to discuss Medicare issues and policy questions and develop and approve reports and recommendations to Congress. Included in the agenda and topics for discussion was the process for developing recommendations for payment updates for the various Medicare payment systems, including the inpatient rehabilitation facility (IRF) prospective payment system. Specifically, MedPAC’s draft recommendation was to eliminate the update to payment rates for fiscal year 2017. The recommendations may be modified in January; those recommendations would be applicable to 2017 payment updates.
Final Report on Safety in Youth Sports Act Released and Presented

On December 10, 2015, the Legislative Budget and Finance Committee (LB&FC) released and presented their report, Implementation of the PA Safety in Youth Sports Act, pursuant to HR 2014-1064. This bill called on the House of Representatives to direct the LB&FC to assess compliance with the Safety in Youth Sports Act, determine the best practices for managing concussions and traumatic brain injuries, and make recommendations on provisions of the act that should be strengthened to be more effective.

While changes were not recommended to the current act, there was concern expressed that concussions are still not taken as seriously as they should be. As a result, it was recommended that the Pennsylvania Department of Education (PDE) develop additional guidelines and recommended practices for schools to follow with regard to identifying, assessing, and managing student athletes suspected of having sustained a concussion. The recommendation was made to PDE to consider the guidelines developed by the New York Department of Education (Guidelines for Concussion Management in the School Setting) as a possible model. The report was accepted and approved to be released.

December Community HealthChoices Documents Released

On December 14, 2015, the Departments of Human Services and Aging released and posted the December release of the draft agreement, and a summary document, for the Community HealthChoices program. Both documents are available for review and public comment. Comments must be submitted via email by Friday, January 8.

Medication Train-the-Trainer Program Scholarship Policy Released

The Department of Human Services/Bureau of Human Services Licensing released the Bureau of Human Services Licensing’s Policy and Application for the Medication Administration Train-the-Trainer Program Scholarship, which will go into effect on January 1. This policy is meant to assist only licensed personal care homes serving a substantial number of residents who receive Supplemental Security Income (SSI), by relieving them of the financial burden of paying for this training. Historically, the requirement for a personal care home to receive the scholarship was for the home to serve just one resident currently receiving SSI. As of January 1, the requirement will be for 25 percent of the home’s residents, served at the time of application, to be receiving SSI. Assisted living residences were previously able to receive the scholarship as well; however, due to the fact that no assisted living residence currently serves, or is likely to serve, the required percentage of residents receiving SSI, this policy does not apply to them. The policy details the criteria that must be met for a home to receive the scholarship and instructions on how to apply. Any questions may be directed to (866) 503-3926 or sent via email.
ODP Updates

The Office of Developmental Programs has released the following information available on the ODP Consulting website.

Reissued: Announcement #060-15: Adult Protective Services SC Required Training: due to the DHS website update, ODP is reissuing this announcement with the revised path to the information for mandatory reporters.

Announcement #099-15: PA Department of Human Services Medication Administration Training Program Additional Classroom Training Sessions for 2015; these are the last training sessions for 2015. The next classes will be scheduled for March.

Announcement #100-15: Enterprise Incident Management System Implementation Information New System Role Conversion Activity; effective January 4, ODP will use the EIM system for all incident management reporting functions.

Announcement #101-15: National Core Indicators to Conduct Staff Stability Survey.

Announcement #102-15: View SELN Employment Webinars and Complete Surveys for SC Required Training Credit.

Announcement #103-15: Employment Manual and Employment Supplement Obsoleted Effective 10/30/15; this has been replaced by the Pathway to Employment Guidance for Conversations.

Announcement #104-15: Recorded Session Available of Supports Coordinator’s Conversations with Deputy Secretary Nancy Thaler; this provides two hours of required SC training credit.


Announcement #107-15: PA Department of Human Services Medication Administration Training Program Scheduling of Extra Recertification Sessions; three additional trainings scheduled for December 2015.

Announcement #108-15: Enterprise Incident Management System Implementation Information: Training Resources Now Available and Upcoming Question and Answer Sessions; ODP will begin using this new system on Monday, January 4, for all incident reporting.

Announcement #109-15: Availability of Handouts from Face-to-Face Training: Addressing Day to Day Risk with the Team.

Announcement #110-15: New Enterprise Incident Management System (EIM) Implementation Information; Certified Investigators must be added to EIM; ODP will begin utilizing EIM system on Monday, January 4, for all incident reporting functions.

Informational Memo #111-15: College of Direct Support New Statewide Administrator, Institute on Disabilities at Temple University; Contact via email or (866) 865-6170.

Autism Waiver

The Office of Developmental Programs Bureau of Autism Services (BAS) is requesting public input for the Autism Waiver Renewal. Comments will be accepted until Monday, January 11. BAS is proposing to revise the waiver, which has a new effective date of Friday, July 1, as follows:

- Update terminology;
- Revise quality measures and reporting requirements;
- Increase the number of individuals served from 518 to 568;
- Add reserved capacity for 10 persons discharged from a state hospital;
- Allow use of an interim service plan when an individual has a protective services span;
- Revise provider qualifications;
- Remove occupational therapy as a service; and
- Add performance measures to meet new financial accountability sub-assurances.

Please share your comments by Sunday, January 10, with RCPA’s Linda Drummond to be included with the association’s recommendations.
Public Input on CMS Waiver Rule Changes

ODP has been conducting waiver listening sessions across the state for public input, regarding the federal Centers for Medicare and Medicaid Services (CMS) renewal of the Consolidated and Person/Family Directed Supports waivers, effective 2017. ODP will submit the renewal plans in mid-2016. These Medicaid waivers are funded by state and federal tax dollars. The federal medical assistance percentage received by the state for ODP’s waivers for the period October 1, 2015, through September 30, 2016, is 52.01%.

The revised draft waivers will be available for public comment early in 2016. It is anticipated that there will be new or changed service definitions and alignment of provider qualifications based on the CMS Waiver Rule changes, which states must implement by March 2019. ODP did submit waiver transition plans to CMS and CMS has responded with a letter requiring additional revisions to the transition plans.

ABLE Update

The state’s ABLE Coalition has worked on the development of two informational flyers. One can be used for families with children and the other for adults with disabilities. The coalition has sent press releases to the media regarding the need for the state’s legislature to pass Senate Bill 879. This legislation will establish a savings program by the Treasury Department to encourage savings accounts for individuals with disabilities — the Pennsylvania ABLE Savings Program and the ABLE Savings Program Fund — and impose duties on the Treasury Department. The coalition has met several times with the Pennsylvania Treasury Department regarding implementation of these accounts once the legislation is passed into law.

OVR Unified State Plan

The federal Workforce Innovation and Opportunities Act (WIOA) requires each state to develop a cross-systems unified plan, to provide better school-to-work transitional services to individuals with disabilities. The Department of Labor and Industry is currently writing its 2016 state plan; the required four-year OVR Unified Plan is under development and is a component of the state plan. A copy of the draft plan is available on the Department of Labor and Industry website, under Draft Vocational Rehabilitation (VR) Services Portion of the State Plan. In January, Labor and Industry will offer a 30-day public comment period for the entire state plan.

Business Strategies

The US Office of Disability Employment Policy has published a supplemental report to its Business Strategies that Work: A Framework for Disability Inclusion. Accompanying Research and Resource Compendium overviews four years of recent literature about the recruitment, hiring, retention, and advancement of individuals with disabilities. It provides a list of technical assistance materials to assist employers regarding disability inclusion initiatives.

Apprenticeship Programs

The US Department of Labor has issued a Notice of Proposed Rulemaking (NPRM) regarding apprenticeship programs for individuals with disabilities. The Employer Assistance and Resource Center (EARN) has prepared a policy brief to provide information on the main issues of this rulemaking.

This policy brief provides:

- Highlights of the major changes to the existing rule;
- Summary of the key provisions of the NPRM applicable to all protected groups; and
- Summary of the NPRM from a disability perspective.

Resources

- The Job Accommodation Network has developed an 18-minute training module, “Bridging the Gap Across Transition,” to provide information for youth with disabilities, regarding their rights under the Americans with Disabilities Act and transitioning from school to post-secondary education, training, or competitive employment.

- Free archived webinar from Cornell University, “Improving Employment Outcomes for People with Disabilities,” overviews an initiative to increase employment opportunities for persons with disabilities by increasing technology accommodation in the workplace.
IDD FOCUS

Rehabilitation Clearinghouse
The Rehabilitation Services Administration has implemented a National Clearinghouse of Rehabilitation Training Materials. This site offers access to numerous vocational rehabilitation education and training resources; in addition, users may upload and disseminate their own rehabilitation training materials from this website.

Tech Toolbox
The National Arc, through a partnership with the Comcast Foundation, has developed the Tech Toolbox™. This toolbox is designed to assist individuals with intellectual or developmental disabilities in accessing current technology to enhance their daily living abilities. There are currently over 500 apps and devices listed.

DRUG & ALCOHOL ACTION

DDAP Supports “Flex Bed” Approach
On December 2, 2015, the Department of Drug and Alcohol Programs (DDAP) issued a clarification on “flex beds.” DDAP has determined there is a need to remove barriers to treatment access and to assist facilities in their efforts to effectively utilize physical plant and human resources to best meet the needs of individuals entering residential treatment. DDAP has decided a facility may be permitted, upon request and approval by DDAP, to utilize empty beds in one activity to conduct services provided in the other activity, otherwise referred to as “flex beds.”

The “flex bed” approach will allow the facility to place additional individuals in empty beds of the other licensed activity. A facility must submit an exception request to be considered for approval to flex beds between the residential detoxification and residential rehabilitation activities. Refer to Licensing Alert 4-97 on the Department of Drug and Alcohol Programs web page for specific instructions on how to submit an exception request. Further clarification regarding “Licensed Capacity” can be found at Licensing Alert 1-94.

D&A Regulation Review: Staffing Regulations Revisited
As previously reported, a small group of dedicated drug and alcohol (D&A) members have been meeting regularly to review and make recommendations to revise Chapter 704, Staffing Requirements for Drug and Alcohol Treatment Activities. A draft document was sent out to members, requesting suggestions for changes to be submitted no later than Thursday, January 7. Once feedback has been received from RCPA D&A members, the document will be submitted to the Department of Drug and Alcohol Programs (DDAP) for consideration.

These regulations were previously reviewed and submitted to DDAP, but were met with resistance, due to the proposed elimination of the counselor assistant and a requirement for at least a bachelor’s degree for the counselor. The work group decided to revise the initial submission, including the counselor assistant and removing the bachelor’s degree requirement. The majority of RCPA members have more stringent requirements. The work group believed that countless other changes in the staffing regulations were desperately needed and should not be held up due to the two major areas of disagreement, especially in light of their minimal impact to RCPA members. Special thanks to the members of the regulation work group. These members devoted a significant amount of time and energy to this grueling process.

“If you don’t go after what you want, you’ll never have it. If you don’t ask, the answer is always no. If you don’t step forward, you’re always in the same place.”
— Nora Roberts
Naloxone in School, “Just in Case”
Several Bucks County school districts will be adding naloxone (also known by the brand name Narcan) to their high school emergency response plans. RCPA hopes that this local trend will spread across the state with school districts stocking naloxone “just in case.” Under a law signed by former Governor Corbett, first responders and family members of at-risk drug users are permitted to obtain and administer it. The Bucks County Drug and Alcohol Commission says the number of people younger than 26 seeking drug treatment is growing and heroin is the drug of choice for the fourth year in a row. While many in the community support and applaud this “just in case” response capability in schools, there has also been negative feedback. Some community members believe overdoses act as a warning and that Narcan will only enable users. Diane Rosati, executive director of the Bucks County Drug and Alcohol Commission, said the enabling concern is a “myth,” and notes that after folks are saved through naloxone, it’s extremely important to offer treatment opportunities.

Return from Deployment and Risk of Abuse
The Children’s Hospital of Philadelphia’s PolicyLab recently published findings in The American Journal of Public Health that there is an increased risk of child abuse and neglect when Army soldiers with young children return home from deployment. While prior research had revealed an increased risk to children while parents were deployed, this study demonstrates that elevated stress when a soldier returns home can have real and potentially devastating consequences for some military families. More information can be found in the PolicyLab press release and media coverage in HealthDay, USA Today, and Military.com.

Garrett Trout Appointed to Co-Chair RCPA Children’s Committee
RCPA’s Children’s Division is pleased to announce that Garrett Trout, chief executive officer of TrueNorth Wellness Services, will now serve as co-chair of the Children’s Committee and Children’s Steering Committee. Garrett has over 23 years of experience in the behavioral health and human services fields, working with and leading child and adolescent behavioral health and child welfare programs in inpatient, residential, and community based services. He has served for many years as an active member of the PCPA, and now RCPA, Children’s Division leadership, often representing RCPA to state policy and planning work groups. Mr. Trout will join Tammy Marsico, director of behavioral health services at The Children’s Institute, in leading our membership’s policy, planning, and practice focus and priority setting through the Children’s Committee, Children’s Steering Committee, and work groups.

Serving Young Children, Challenges, and Opportunities
Along with a growing awareness about interventions in the field of early childhood social and emotional wellness, trauma, and mental health, has come a focus on the very high rate of pre-school and daycare expulsions. Pennsylvania’s policy leaders in the Office of Child Development and Early Learning are now looking closely at ways to address the behavioral health and wellness needs of our youngest citizens. The RCPA Children’s Division will be working to advance policy and service initiatives that range from expanded developmental screening to early childhood mental health consultation and coordinated approaches for high quality referral and intervention. Community providers can expect to see increased attention, and action to meet these needs, at the state and local levels throughout the year ahead.

Courts Require Insurers to Pay for Autism Services in School
After a five-year legal battle, the state appellate court has ruled in Burke v. Independence Blue Cross (IBC). The Pennsylvania Superior Court held that insurers like IBC must cover “in school” services for children with autism. Pennsylvania’s Act 62, the Autism Insurance Law, requires many private health insurers to pay for diagnoses and treatment of autism for children and adolescents. IBC argued that since the therapist worked at school, the law didn’t apply to them, because their policy had an exclusion clause that stated services could not be covered if the care was provided at certain locations, including schools. The court decision will uphold the child’s right under Act 62 to receive autism services in school, which potentially affects tens of thousands of Pennsylvania schoolchildren. Attorney David Gates of the Pennsylvania Health Law Center (PHLC) tirelessly championed this cause through waves of delays and appeals by IBC. PHLC has met with the insurance commissioner and the secretary of human services, who have pledged their support in the implementation of this decision.
Those of us in the child serving professions recognize that “magical thinking” has both risks and rewards in our lives among children. As we begin the new year, this author has decided to apply the “bring an umbrella” version of magical thinking to 2016. The theory is that “if you carry an umbrella it won’t rain and you won’t need it!” With that in mind, we share some rainy day advice from Doctor Robert Wilson and the Pennsylvania Psychiatric Society published in the York Daily Record:

“We live in a plugged-in world. News travels quickly, and one can become overwhelmed by fear to the point that they avoid situations like going to public events or flying on planes. Once this gets started, it can turn into a cycle that some people find difficult to break. However, the cycle can be broken, and even prevented before it gets started. Addressing concerns right away and initiating important dialogue between parents, children, and medical providers is an important first step in reducing fear and anxiety. Both the Pennsylvania Psychiatric Society and Pennsylvania Medical Society offer the following suggestions:

- Avoid/reduce additional media exposure for children and those individuals suffering from anxiety concerns to minimize the risk of additional adverse psychological and physical outcomes.
- Speak frankly with your children about uncertainty in their world. Be realistic in your approach. Do not promise them that additional attacks will not occur, but answer their questions honestly without overemphasizing the actual violence. Make them feel safe knowing that you and other adults are there to protect them.
- Encourage an environment that promotes safety and allows for verbal and written interaction about personal concerns for safety.
- Emphasize that it is not uncommon to feel scared, sad, or worried about the future.
- Learn relaxation techniques that can assist you in reducing stress.
- Exercise.
- Eat healthy and avoid too much sugar and caffeine – both of which can be connected to increased anxiety levels.
- Keep a normal routine that minimizes unexpected changes. Sleep regular hours. Eat at regular times. Exercise when you normally would.”

And from all the staff of RCPA, may peace be with you, your families, and the children and communities you serve in this new year.
ASERT Plans for 2016

The Autism Service Education Resource and Training (ASERT) Collaborative is developing an array of new programs and initiatives for 2016. Among the projects underway for the upcoming year are:

- In early 2016 the initial phase of a new training platform on PAautism.org will be released. This platform will include educational videos on a variety of topics for professionals, as well as families and individuals. The full unveiling of this new resource is scheduled for release in April.

- Starting in January, the ASERT newsletter and website will feature success stories highlighting positive experiences and outcomes for individuals with an autism spectrum disorder in Pennsylvania. Perspectives will be shared by individuals with autism, their family members, and the professionals that support them.

- In April, ASERT will be launching a Transition Age Youth Initiative. The focus of this new initiative will be to provide resources and support to transition-age individuals and their families.

Children’s Committee

RCPA Children's Division members from across the state gathered in Harrisburg and via webcast on December 8, 2015, and offered our thanks to Brad Barry, who has retired from his role as CEO at Child Guidance Resource Centers and co-chair of our committee. Members then were presented with an array of projects and initiatives, impacting youth and transition age young adults, by senior staff from the Office of Vocational Rehabilitation (OVR). Members can look for a more in-depth OVR webcast presentation being planned for this spring. The committee was then joined by Ellen DiDomenico, policy director for the Office of Mental Health and Substance Abuse Services, who reviewed the growing array of changes in the Children’s Bureau and initiatives impacting behavioral health and child, adolescent, and transition age youth services. Members shared their perspectives on several operational challenges that impact service co-location and licensing, as well as barriers to meeting staffing needs related to autism service delivery, and the developing medical necessity criteria for Applied Behavioral Analysis services to children with autism. The first meeting of the full Children’s Committee this year is scheduled for Wednesday, February 3.

Criminal Justice Committee

Many statewide criminal justice entities presented at the RCPA Criminal Justice Committee meeting on December 8, 2015, including Pennsylvania Commission on Crime and Delinquency, Department of Corrections, and the Sentencing Commission. Reports were also provided by the Office of Mental Health and Substance Abuse Services (OMHSAS) and the Department of Drug and Alcohol Programs (DDAP). One major problem discussed was the lack of capacity for offenders in need of community treatment, especially for offenders needing co-occurring services. One reason for the lack of capacity is the low rates offered by the state departments. DDAP has instituted a “flex bed” policy, which is helping. Another critical step in getting offenders treatment is enrollment in Medicaid. There has been significant improvement in 36 county jails doing the enrollment behind the walls before the offender is released. The committee also discussed the fact that medication assisted treatment is becoming more accepted in the criminal justice programs.

Drug and Alcohol Committee

Gary Tennis, secretary of the Department of Drug and Alcohol Programs (DDAP), and numerous DDAP staff met with the D&A Committee and discussed major issues, including the opioid overdose epidemic and all efforts being deployed to address the crisis. Capacity issues were also discussed in this meeting, as well as the need for rates to cover costs, capacity increase requests to be approved quickly, and PROMISe numbers to be assigned more efficiently. RCPA has been working on revision of the staffing regulations; they are nearing completion and will soon be sent out to the membership for comment before being submitted to DDAP. Mary Jo Mather from the Pennsylvania Certification Board provided an update and emphasized that many certified recovery specialists have received certification and are available for employment.
### January

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<td>10:00 am – 2:00 pm</td>
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### February

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<th>Event Description</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Tuesday, February 2</td>
<td>12:00 pm – 1:00 pm</td>
<td>IPRC Webinar: Safe Transport for Children with Special Health Needs</td>
<td></td>
</tr>
<tr>
<td>Tuesday, February 2</td>
<td>9:30 am – 12:00 pm</td>
<td>Criminal Justice Committee</td>
<td></td>
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<tr>
<td>Tuesday, February 2</td>
<td>1:00 pm – 4:00 pm</td>
<td>Drug &amp; Alcohol Committee</td>
<td></td>
</tr>
<tr>
<td>Wednesday, February 3</td>
<td>9:30 am – 12:00 pm</td>
<td>Mental Health Committee</td>
<td></td>
</tr>
<tr>
<td>Wednesday, February 3</td>
<td>1:00 pm – 4:30 pm</td>
<td>Children’s Committee</td>
<td></td>
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<tr>
<td>Thursday, February 4</td>
<td>9:30 am – 11:30 am</td>
<td>Supports Coordination Organization Subcommittee</td>
<td></td>
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<tr>
<td>Thursday, February 4</td>
<td>9:30 am – 11:30 am</td>
<td>Vocational Rehabilitation Subcommittee</td>
<td></td>
</tr>
<tr>
<td>Thursday, February 4</td>
<td>12:00 pm – 4:00 pm</td>
<td>Intellectual/Developmental Disabilities Committee</td>
<td></td>
</tr>
<tr>
<td>Thursday, February 11</td>
<td>12:00 pm – 1:00 pm</td>
<td>IPRC Networking Call</td>
<td></td>
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<tr>
<td>Wednesday, February 17</td>
<td>10:00 am – 12:30 pm</td>
<td>Human Resources Committee</td>
<td></td>
</tr>
<tr>
<td>Thursday, February 18</td>
<td>10:00 am – 12:30 pm</td>
<td>Outpatient Rehabilitation Committee</td>
<td>Penn Grant Centre – RCPA Conference Room</td>
</tr>
<tr>
<td>Wednesday, February 24</td>
<td>10:00 am – 2:00 pm</td>
<td>Brain Injury Committee</td>
<td></td>
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</table>