Special Event With Patrick Kennedy

On Wednesday, April 13, RCPA, along with other health care providers in the South Central region, will be sponsoring a special event with Patrick Kennedy. Mr. Kennedy will be speaking about his personal and political battle with mental health and addiction. The event will be held at the Scottish Rite Cathedral in Harrisburg. Please see here for further information and how to RSVP for this very special evening.

Sarah Eyster, Director
Mental Health Division,
Eastern Representative

The Mental Health Division of RCPA represents and works for provider members offering mental health services across the Commonwealth. Although indicative of working with adult mental health, the division also works closely with the RCPA Children’s Division as well as the Drug and Alcohol Division. Below are some highlights of the current activities.

The RCPA Mental Health Division has been working diligently to identify new programs to meet the needs of adult Pennsylvania residents with mental health issues who are seeking recovery. Programs such as co-located, integrated physical and behavioral health services are on the top of many members’ priorities. The biggest issue facing providers today is the actual integration of care in a shared space. The Pennsylvania Department of Human Services (DHS) leadership, through both the Office of Mental Health and Substance Abuse Services (OMHSAS), and the Office of Medical Assistance Programs (OMAP), has identified issues related to the Stark Laws which prohibit sharing space/co-locating due to the concern of financial incentives or collusion/persuasion of referring people to only the co-located provider. In addition to the Stark Law, there are OMAP regulations which prohibit the payment of two services provided in one day. RCPA, along with the

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MENTAL HEALTH DIVISION
Continued from page 1

statewide Federally Qualified Health Care (FQHC) association, submitted an objection to the interpretation of the Stark Laws. Leaders from DHS are working internally to offer alternatives until which time regulations can be changed – stay tuned.

One of the biggest discussion areas over the last year for RCPA mental health members has been the state application to the Substance Abuse and Mental Health Administration (SAMHSA), for becoming a Certified Community Behavioral Health Clinic (CCBHC) demonstration state. Pennsylvania was awarded a demonstration planning grant to create CCBHCs in the Commonwealth. Initially, there were over 74 interested organizations across the state; however, far fewer actually submitted an application along with a cost report setting the rates for the first year. DHS leadership has not indicated the number of CCBHCs that will be selected; applicants will be notified in the near future. RCPA is committed to working with CCBHC-selected providers, along with providers who would be the “learning community” if Pennsylvania is selected as one of the eight states. RCPA will bring national expertise to Pennsylvania, and the executives of the providers selected to become a CCBHC will be welcomed to a monthly national call through National Council.

Over the past several months, RCPA staff have been meeting with leaders from the Behavioral Health Managed Care Organizations (BH-MCOs) in the HealthChoices Program to explore opportunities for collaboration and standardization across the Commonwealth. There is agreement that some efficiencies can and will be found, most likely to be first related to provider credentialing. More exciting news to follow about other opportunities.

Related to the BH-MCOs’ work above is the warning from the DHS Office of Long Term Living to managed care companies and providers, to gear up for the aging and disabled population that will be moving into managed care. Members should be looking for expertise in working with the aging population related to mental health and substance abuse issues. When experts are not readily available, the state, managed care companies, and providers must create competency through training. This resonates well with the Mental Health Committee which has an older adult work group ready to work with statewide organizations to gain knowledge about this group of people. Deborah Allen, executive director of the Pennsylvania Coalition on Behavioral Health and Aging, will be joining the next Mental Health Committee meeting on Wednesday, April 13. Members are encouraged to share expertise in an effort to support the aging population.

For more information, please visit the Mental Health section of the RCPA website.
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.

Minimum Wage and Federal Department of Labor’s Overtime Rule

The minimum wage and the Federal Department of Labor (DOL) overtime rule are two very important issues that will affect how our members will manage their businesses. On March 7, Governor Wolf signed an executive order raising the state’s minimum wage from $7.25 to $10.15 for employees and contractors under his jurisdiction. The executive order covers employees of organizations that negotiate state contracts or that lease property to the Commonwealth. Those include employees that perform direct services to the Commonwealth or spend at least 20 percent of their working time on ancillary services related to the contract or lease. In addition to this new executive order for paying state contract employees $10.15, the governor has asked the General Assembly in his budget address to increase the minimum wage for all employees in the Commonwealth.

An increase in the minimum wage is just one concern. Our members also have to worry about the Federal DOL’s proposed rule, entitled “Defining and Delimiting the Exemptions for Executive, Administrative, Professional, Outside Sales and Computer Employees” that was published in the Federal Register on July 6, 2015 (RIN 1235–AA11).

The DOL’s proposed rule would require our members to pay overtime to employees who make under $50,440/year. While these economic incentives are greatly needed for employees, they place a burden on our members’ budgets. As we all know, health and human service providers do not have the ability to negotiate rates or to pass on increased operating costs to the state, the people they serve, or other entities. RCPA is 100% supportive of an increase to wages, because an economic investment in staffing improves recruitment and retention efforts; however, RCPA has serious concerns about an increase in the minimum wage and the DOL’s proposed rule because of the fiscal impact it will have on members.

- An increase in the minimum wage and the overtime rules will be an unfunded mandate;
- RCPA members are not large, privately owned corporations. In fact, many are funded largely or solely through public funds (i.e., DHS budget line items); therefore, RCPA members cannot increase their prices to consumers to cover the additional costs that an increase in the minimum wage would bring;
- Raising minimum wage causes compression of existing salaries, leading to eventual raises for other experienced workers who are right now at or near $10.15 per hour.

RCPA is extremely concerned that these proposals would have negative unintended consequences for many health and human service providers, their employees, and their consumers. While our association supports an increase in wages, RCPA wants to make sure that the minimum wage and proposed overtime rule are fully vetted prior to any state or federal action.

RCPA is reaching out to the governor, the General Assembly, as well as our PA Congressional delegation, to make sure they know the impacts that these proposals will have on health and human service providers. As things progress, RCPA staff will keep members apprised regarding how these issues are progressing. Contact Jack Phillips, RCPA director, government affairs, with any questions.
RCPA Capitol Day
Tuesday, April 12
Harrisburg, PA

RCPA is hosting Capitol Day on Tuesday, April 12 to advocate for a realistic budget that offers the supports required by Pennsylvanians in need of adult and children’s mental health, brain injury, medical/vocational rehabilitation, intellectual and developmental disabilities, substance use, and autism services. It is important that members take action! RCPA urges members, supporters, consumers, and families to join us at Capitol Day and let elected officials know these services are essential and must be supported.

RCPA has created an RCPA Capitol Day web page, where members can register to attend Capitol Day and will find many helpful resources.

RCPA asks members to schedule their own legislative appointments. Once appointments are made, please notify RCPA Director of Government Affairs, Jack Phillips, with appointment times. For your convenience, sample letters to schedule appointments may be accessed from the “Resources” link, and legislator contact info may be accessed from the “Legislator Information” link. A draft agenda and budget one-pager for Capitol Day legislative visits are now available on the website through the “Handouts” link.

For RCPA members who will be staying overnight on April 11 and 12, we have negotiated a special room rate of $106 at the Harrisburg Crowne Plaza, which includes breakfast. Further questions may be directed to Jack Phillips.

RCPA PAC Third Annual Golf Outing
Please join us for RCPA PAC’s third annual golf outing at the beautiful Hershey Country Club on Tuesday, September 27! The RCPA PAC raises money and supports 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 RCPA PAC can make the difference between a win and a loss on an issue or assist in making a new ally. Even if you can’t be a strong contributor to RCPA PAC fundraising efforts, we all have friends and business associates who are interested in helping our allies to victory. Getting involved in RCPA PAC not only allows you to help make decisions on who the committee supports, but also helps to identify new folks who will join in our successes. Further questions may be directed to Jack Phillips.

NEW MEMBER
FULL PROVIDER
Developmental and Disability Services
Colleen Christian, executive director
1126 Walnut St
Lebanon, PA 17042

BUSINESS
PsyTech Solutions, Inc.
Mike Kreamer, president
1138 Stone Creek Dr
Hummelstown, PA 17036

MEMBERS IN THE NEWS
Berks Counseling Center Community Forum
On January 26, RCPA member Berks Counseling Center held a community forum on physical and behavioral health care integration. RCPA Director, Mental Health Division and Eastern Region Representative Sarah Eyster was in attendance. The event was held at the DoubleTree by Hilton in Reading, PA.

Save the Date!
Magellan Behavioral Health of Pennsylvania and Bucks, Delaware, Lehigh, Montgomery and Northampton counties 2016 Statewide Conference: Advancing Addictions Treatment in the Era of Healthcare Reform. To be held Thursday, June 9 – Friday, June 10 at the Radisson Hotel Harrisburg.
Webcast on IMPACT Act Available for Viewing

The February 23, 2016, webcast conducted by the Centers for Medicare and Medicaid Services, focused on the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014, is available to be viewed. The IMPACT Act requires the reporting of standardized patient assessment data to better coordinate care and improve outcomes for individuals with Medicare.

CMS Creates Long-Term Services and Supports Open Door Forum

The Centers for Medicare and Medicaid Services (CMS) recently announced the creation of a new open door forum, Long-Term Services and Supports. This forum addresses the concerns of the patient advocacy and beneficiary communities in relation to Medicare and Medicaid programs. The forum will cover questions and issues on billing, payment, and delivery of services to persons with disabilities. The next quarterly call has been scheduled for Tuesday, April 26, 2016, at 2:00 pm. Information, including the phone number and agenda, will be posted to the CMS Long-Term Services and Supports Open Door Forum web page prior to the call.

Corrections Made to Physician Fee Schedule Final Rule

The Centers for Medicare and Medicaid Services published a correction notice in the March 8, 2016 Federal Register which corrects technical and typographical errors that appeared in the Medicare Physician Fee Schedule final rule. The final rule was published on November 16, 2015.

House Energy and Commerce Committee Holds Hearing on Medicare Payment Reforms

On March 17, 2016, the House Energy and Commerce Committee’s Subcommittee on Health held a hearing that examined the implementation of Medicare payment reforms. The hearing focused on the repeal of the Sustainable Growth Rate (SGR) formula, which was a flawed payment system for doctors that required Congress to repeatedly implement temporary fixes for over a decade. The bipartisan and bicameral agreement to repeal and replace the SGR was coupled with other health-related provisions and overwhelmingly passed both chambers last year. The bill was signed into law on April 16, 2015. During the hearing, subcommittee members had the opportunity to collaborate with the Centers for Medicare and Medicaid Services about how the process is going, and to discuss the work the agency is doing to encourage value-based payments that would qualify as an eligible alternative model.

CMS Announces Continuation of Competitive Bidding Program

The Centers for Medicare and Medicaid Services (CMS) recently announced the new single payment amounts, and began sending contract offers to successful bidders, for Medicare’s Round 2 Recompete and the national mail-order recompete Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program. Under this program, DMEPOS suppliers compete to become Medicare contract suppliers by submitting bids to furnish certain items in competitive bidding areas. CMS reported that Medicare has saved approximately $3.6 billion after the first two years (covering the period of July 1, 2013 through June 30, 2015) of Round 2 and the national mail-order programs. The Round 2 and national mail-order program contract periods expire on Thursday, June 30, 2016. The new contracts will become effective on July 1, 2016, through December 31, 2018. The national mail-order recompete for diabetes testing supplies will be implemented at the same time as Round 2 Recompete.
PROMISe Enrollment Now Online

The Department of Human Services (DHS) Medical Assistance Online Provider Enrollment Application information is now available to provider organizations. The improvements and modernization of the PROMISe system have been strongly encouraged by RCPA and a significant goal of DHS. Benefits of online enrollment application will allow documents that previously had to be mailed or faxed to be uploaded directly to the portal, permit providers to see the status of submissions, and decrease the wait time to review applications.

The information you will need to submit an application for enrollment:
- Access the online enrollment application;
- Review the training guide; and
- Review the Frequently Asked Questions document for important clarifications.

If you require assistance at any time during the completion of an application, a HELP feature is available. Supplemental Services require the Behavioral Health Managed Care Organization to attest that a provider is credentialed.

RFP for Community HealthChoices Released

The Department of Human Services (DHS) has released the long-awaited Request for Proposals (RFP) for Community HealthChoices (CHC). CHC is a new initiative that will provide managed long-term services and supports (MLTSS) to older individuals, persons with physical disabilities, and physical health coverage to those who are dually eligible for Medicare and Medicaid.

The goals of CHC are to:
- Enhance opportunities for community-based services;
- Strengthen health care and LTSS delivery systems;
- Allow for new innovations;
- Promote the health, safety, and well-being of enrolled participants; and
- Ensure transparency, accountability, effectiveness, and efficiency of the program.

The official release of the RFP is the first step in the procurement process for the selection of managed care organizations (MCOs). The Commonwealth plans to coordinate health and LTSS through MCOs. Participants will have a choice of two to five MCOs in each region. Responses to the RFP by the managed care organizations are due on Monday, May 2, 2016.

CMS Issues Corrections to CCJR Final Rule

In the March 4, 2016 Federal Register, the Centers for Medicare and Medicaid Services (CMS) issued corrections to the Comprehensive Care for Joint Replacement (CCJR) final rule that was issued on November 24, 2015. A number of technical and typographical errors were corrected.
MedPAC Releases March Report to Congress on Medicare Payment Policy

The Medicare Payment Advisory Commission (MedPAC) announced the release of its March 2016 Report to Congress: Medicare Payment Policy. The report outlines MedPAC’s analyses of payment adequacy in fee-for-service (FFS) Medicare and provides a review of Medicare Advantage and the Part D prescription drug benefit program. Some of MedPAC’s recommendations included in the report specific to inpatient rehabilitation facilities (IRF): elimination of a payment update for 2017; conduct focused medical record reviews that have unusual patterns of case mix and coding; and expansion of the IRF outlier pool to redistribute payments more equitably across centers and providers.

OMHA to Include Part A Claims in Settlement Conference Facilitation Pilot

In late February of this year, the Office of Medicare Hearings and Appeals (OMHA) announced an expansion (Phase III) of its Settlement Conference Facilitation pilot to include Medicare Part A claims, which includes claims under dispute from inpatient rehabilitation facilities. This announcement was part of an Appellant Forum hosted by OMHA. The agenda and slide presentation from the forum provide additional information. OMHA is the entity that is responsible for administering the Administrative Law Judge (ALJ) level of the Medicare appeals process. This expansion, which became effective on February 25, 2016, is an effort to help resolve the extensive backlog of ALJ hearing requests, which is approximately at 240,000 for FY 2015. The previous phases of expansion were limited to Part B claims and have been in effect since June of 2014. To date, only a small amount of claims have been removed from the queue.

Oversight and Investigations Subcommittee Review of Concussions

On March 14, 2016, the House Energy and Commerce Oversight and Investigations Subcommittee convened a forum on the state of knowledge relating to the causes, effects, and treatments of concussions. The forum featured input from experts representing the medical, military, athletic, and research communities with a goal of building a collaborative body of knowledge to help improve the diagnosis and treatment of concussions. Included in the opening statement by Honorable Tim Murphy, chairman of the subcommittee: “Today, we begin a new chapter in the national dialogue on concussions. We are not here to re-litigate past actions, point fingers, or cast blame. We are here to take a step back, to gain some perspective, and to begin a conversation focused on solutions, not on problems.” And most importantly, “We are also here today to make one thing clear – this is not just a sports issue or a military issue. This is a public health issue...that is why we are here today – to ensure we are on the path, though it may be long, to providing the public the answers they deserve.” The list of participants and webcast of the forum are available on the Energy and Commerce Committee website.

Everybody is a genius. But if you judge a fish by its ability to climb a tree, it will live its whole life believing that it is stupid.

— Albert Einstein
DDAP Clarifies Electronic Recordkeeping and the Use of Electronic Signatures

Several RCPA members reported issues with auditors from the Department of Drug and Alcohol Programs (DDAP), regarding the use of the PIN to provide the electronic signature. After discussion with officials at DDAP, a bulletin (DDAP Licensure Information Bulletin 01-16) has been released that provides clarification. The bottom line is that DDAP will now accept using the PIN to retrieve the electronic signature. Below are two sections of the bulletin released on February 26:

1. “Many of the facilities holding licenses or certificates of compliance, as well as certificates of approval to provide narcotic treatment services, have converted to and/or are in the process of converting from hardcopy client and patient records to electronic records. Some facilities which have already converted to electronic recordkeeping continue to maintain some hard copy records in order to meet the department’s regulatory requirements, relative to the need to record client/patient signatures and physician signatures on certain documents. The department is involved in an ongoing process to eliminate duplicative recordkeeping throughout the drug and alcohol treatment system. This information bulletin defines the department’s expectations for electronic recordkeeping and the use of electronic signatures in lieu of pen and ink signatures, and applies to all facilities holding licenses, certificates of compliance, and/or certificates of approval in relation to the following chapters:

   ▪ 28 Pa. Code Chapter 709 – Standards for Licensure of Free Standing Treatment Activities;
   ▪ 28 Pa. Code Chapter 710 – General and Special Hospitals; and

   ▪ 28 Pa. Code Chapter 711 – Standards for Certification of Treatment Activities Which Are a Part of a Health Care Facility.”

2. “Facilities must submit to the department and maintain current policy and procedure addressing the electronic signature system. The procedures need to express how the signature will be affixed by the individual to whom it pertains and whether it is applied using an electronic signature pad or a signature code (digital signature) for that individual. The policy must describe how signature codes are assigned to individuals and how those codes can be used only by the person to whom the code is assigned.”

Questions should be directed to Lynn Cooper.

Senator Pat Toomey Holds Field Hearing on Heroin and Opioid Abuse in Pennsylvania

Toomey was joined by a panel of guests including President Judge Michael J. Barrasso, Lackawanna County Court of Common Pleas; Margaret Jarvis, MD, medical director of Marworth (Geisinger Health System) and member of the American Society of Addiction Medicine Board of Directors; Eric Wright, PharmD, co-director of the Center for Pharmacy Innovation and Outcomes – Geisinger Health System; and Robert Long, Clearbrook Treatment Centers. It was this panel who testified on the terrible toll opioid and heroin addiction is taking on Pennsylvanians in the Northeast.

Senator Toomey spoke of the legislation S 524, the Comprehensive...
Addiction and Recovery Act of 2015 and S 1913, the Stopping Medication Abuse and Protecting Seniors Act of 2015. Both aim to reduce doctor and pharmacy shopping, with S 1913 finally allowing “lock-in” programs in Medicare. The lock-in program requires a member of an insurance plan to agree, in writing, to only be seen by one physician and to utilize one pharmacy. This has not yet passed but is critical to reducing the number of opioid-related deaths. Current statistics for the Medicare program show that one in four Medicare patients are prescribed an opioid.

A study performed from 2009–2013 showed that Greene County had the highest number of deaths per 100,000 people at 26. Cambria and Philadelphia counties were tied for second, both with 23.8. Westmoreland County followed with 20.7. These are staggering statistics and in 2016, it is expected that seven Pennsylvanians will die of an opioid or heroin overdose each day. Please contact your federal representatives and ask them to support S 1913, just one more way to try and fight this epidemic.

RCPA Reviews HHS Proposed Changes to Confidentiality Rules of Substance Use Disorder Records

RCPA has organized a work group to review the proposed changes and provide comments. US Department of Health and Human Services (HHS) announced proposed revisions to the Confidentiality of Alcohol and Drug Abuse Patient Records regulations, 42 CFR Part 2. The goal of the proposed changes, which were published in the Federal Register on February 9, 2016, is to facilitate information exchange within new health care models while addressing the legitimate privacy concerns of patients seeking treatment for a substance use disorder. The current rules, often referred to as “Part 2,” were promulgated in 1975, during a time of great concern that the potential use of substance use disorder treatment information in criminal prosecutions would deter individuals from seeking needed treatment. These rules were last substantively updated in 1987.

HHS is proposing to modernize the existing rules because new models are built on a foundation of information sharing to support coordination of patient care; the development of an electronic infrastructure for managing and exchanging patient data; and an increased focus on performance measurement and quality improvement within the health care system. HHS wants to ensure that patients with substance use disorders have the ability to participate in new integrated health care models without adverse consequences that could result from inappropriate disclosure of patient records. Due to its targeted population, the Part 2 rules provide more stringent federal protections for patients with substance use disorder records than most other health privacy laws, including the Health Insurance Portability and Accountability Act.

Comments on the proposed changes may be submitted by using one of the methods outlined in the Notice of Proposed Rulemaking. To be assured consideration, comments must be received no later than 5 pm on Monday, April 11, 2016.

ODP Staff Changes

The Office of Developmental Programs has announced several staff leadership changes effective April 18, 2016. Patty McCool will become special advisor to the deputy secretary, focusing on a range of topics and projects that require coordination across bureaus in ODP and offices within the Department of Human Services. Ms. McCool’s knowledge of the ODP service system and the various offices within the department, along with her strong sense of commitment, will strengthen ODP’s capacity to meet the needs of people receiving services and their families.

Sheila Theodorou will become director of the Bureau of Community Programs. Theodorou has been serving as administrator of the Carbon-Monroe-Pike Mental Health/Developmental Services program since 2001. Prior to her appointment as the administrator, she served as deputy administrator of the joiner’s Developmental Services from 1990 to 2000. Sheila has been an active RCPA member.
RCPA IDD Committee
The RCPA SCO and Vocational Rehabilitation Subcommittees, and IDD Committee meeting, scheduled for Thursday, April 14, will be rolled into one all-day meeting called IDD: The Wave of the Future. The ODP deputy secretary and fiscal director, Adult Protective Services director, and contractors’ director, and DHS special advisory on employment, have all been confirmed so far. Please watch for details; the location of this meeting will be the first floor meeting rooms at the RCPA office building, 777 E Park Drive, Harrisburg.

ODP Updates
The Office of Developmental Programs has released the following information:
- **Announcement #015-16: Electronic Provider Enrollment Application Unavailable for ODP ID Providers.** It is available to the ODP Adult Autism Waiver providers.
- **Announcement #016-16: Provider Qualification Question and Answer**
- **Communication #017-16: Certified Investigation Forum Registration is Now Available**
- **Announcement #018-16: Provider Start-Up and Supports Coordination Transition Funding Available Through the MFP Initiative and to Support the Movement of Benjamin Class Members:** Benjamin Class members are individuals transitioning from state ID centers to the community and using Money Follows the Person process and supplemental startup costs. These startup costs may be in excess of the currently allowed $5,000 per person.
- **Announcement #019-16: Implementation of the Information Referral Tool and Changes to Compass Relating to the Balanced Incentive Program:** effective March 12, enhancements will be implemented to the Information and Referral Tool and COMPASS. Questions may be submitted via email.
- **Autism Seminars: Developing, Collecting and Analyzing:** save the date for April and May sessions around the state.
- **Statewide Positive Practices Meeting on Thursday, April 7, addressing Collaborative Approaches to Challenging Behaviors: Best Practices & Outcomes of the Dual Diagnosis Treatment Teams**
- **Everyday Lives Conference, Wednesday, September 14 – Friday, September 16 at Hershey Lodge,** watch for details
- **Planning for the Future: Supporting Pathways to Employment Regional Session**
- **Reissuing: Announcement #008-16: The Outcome Section of the ISP – Better Outcomes, Better Lives, Part 2:** required training for supports coordinators and SC supervisors; also county department staff who review and approve ISPs. Course available until December 31, 2016.

Licensing Update
The Bureau of Human Services Licensing is making a few changes in how it processes waiver requests. Effective Tuesday, March 1, 2016, any waiver request forms that are missing information will be returned to the provider as “incomplete.” The waiver request form should then be completed in its entirety. This pertains to chapters 2600, 2800, 6400, 6500, 2380, 2390, 3800, 5310, and 5320 providers. Direct any questions to the operator support hotline at 866-503-3926.

OVR Transition Services Contracts
The Department of Labor Office of Vocational Rehabilitation (OVR) has announced eight recipients of their transition services contracts. These projects are to develop new and expanded strategies and programs for transition services for high school students with disabilities. The contracts, totaling $1.2 million, have been awarded to: AHEDD, Community Integrated Services, Goodwill of Southwestern PA, Family Services Association, Lehigh Valley Center for Independent Living, Partners in Progress, Pittsburgh School District, and Slippery Rock University.
ODP Fiscal Work Group Update

The Department of Human Services, under Secretary Ted Dallas, has established an IDD Fiscal Work Group over the last several months. This has been led by the Office of Developmental Programs Deputy Secretary Nancy Thaler and includes several RCPA members. The focus of this work group has been on the IDD residential rate methodology.

At the most recent meeting on February 17, the purpose of the work group was repositioned to specifically provide input to ODP/DHS on the development of a residential fee schedule that will allow for fees that are responsive to individuals’ needs, which also align with CMS requirements that fees are “consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available.”

The work group tasks include:

1. To work with ODP to guide a process for establishing a fee schedule for residential services; and

2. To review and provide additional input into the fiscal section of the 6100 regulations. In order to further consider the recommendations of this sub-group relating to the payment system, the department will move forward with the portions of the proposed rulemaking related to the program and operational aspects, and will move forward with the payment provisions separately with the intention of publishing all components for public comment as final by July 2017.

The key milestones for the rate work include:

- Establish the service definition for residential habilitation;
- Establish the cost components included in the residential habilitation fees;
- Establish a provider survey;
- Distribute the provider survey to all group home providers;
- Analyze survey results;
- Design residential fee schedule structure;
- ODP to model fees;
- ODP to perform scenario testing; and
- Establish an exceptions process.

At this point, RCPA is providing this high-level information to alert you to this change in direction. However, more information is to come from ODP and Deputy Secretary Thaler, especially as the work group continues to meet. RCPA will keep you updated as this progresses.

Please contact RCPA President & CEO Richard Edley with any questions.

ODP FY 2016/17 Budget Overview

Office of Developmental Programs (ODP) Deputy Secretary Nancy Thaler has released the governor’s proposed budget for ODP for the 2016/17 fiscal year.

Highlights include:

- $1.75 billion in state funds; and with the federal match the total will be $3.6 billion
- This is an increase in state funding of 5% from 2015/16 fiscal year
- $12.3 million for home- and community-based services for an additional 850 individuals
- $1.7 million for home- and community-based services for 13 individuals transferring from a private ICF/ID to the community waiver
- $955,000 for community services for 75 transferring from state intellectual disability centers
- Total state funding for community waiver programs is $1.28 billion
- Total state funding for autism services is $24 million
- Total state funding for ID based services is $158.9 million
- Private ICF/ID state funding is $142.6 million
- State ID Centers state funding is $141.8 million

Please direct any questions to Linda Drummond at RCPA.
End the R Word

The Sixth Annual *End the R-Word* celebration, held February 27, 2016, was a great experience. This recognition acknowledges the change in negative terminology from mental “retardation” to intellectual disability. There were many providers and activities available to everyone at Westmoreland Mall in Greensburg, PA. There was a DJ, art exhibit, performances of drumming on exercise balls, singing, and more. There were mascots and many fun things to see and do. Some of the providers who participated were; Acme Providers (drummers), The Arc / Achieva, Community Living Care, East Suburban Citizens Advocacy, NHS, Passavant, Westmoreland Case Management, Westmoreland BHDS, and others. Awareness of the abilities of individuals with intellectual disability was spread with bracelets and t-shirts as well.

Employment First Resources

The US Office of Disability Employment Policy (ODEP) has released a [50-state review](#) of the reimbursement rates and methodologies used in the Home and Community-based Service waivers, related to supported employment and integrated day services. Pennsylvania’s data is on pages 330-355.

DOL Section 14 (c)

The US Department of Labor’s Wage and Hour Division has released updated information regarding Section 14(C) certificates. The web page, “[Subminimum Wage Employment for Workers with Disabilities](#),” provides fact sheets for both workers and employers. This information includes laws and regulations, guidance, e-tools, free seminars, and resources.

Money Management Guide

The Pennsylvania Assistive Technology Foundation has released the third edition of [Cents and Sensibility: A Guide to Money Management](#). This booklet is in response to the need in the disability community to provide the tools to make informed decisions about their financial futures. Issues covered include: how money is spent, developing a budget, and learning how to save.
MENTAL HEALTH HEADLINES

Joint Aging/ID Conference
The state’s Joint Aging/Intellectual Disability Committee is finalizing sessions for the 2016 Building Bridges Conference to be held Tuesday, May 10 – Wednesday, May 11, 2016, at Holiday Inn, Grantville. Sessions will include:

- Promoting Positive Caregiving;
- Aging with ID and Mental Health Challengers;
- Eliminating Micro-violence from Everyday Lives;
- Future Planning for Seniors with ID;
- Home and Vehicle Modification Options;
- Independent Living Technology; and
- Supported Decision Making.

ThinkWork!
The Institute on Community Inclusion has released a report as part of the ThinkWork! group of projects looking at competitive community employment for individuals with disabilities. This report, Trends in Employment Outcomes of Young Adults with Intellectual and Developmental Disabilities, 2006–2013, reviews the employment and economic outcomes for these individuals in all 50 states.

ThinkWork! offers a three-part toolkit for transition professionals on considering community service for employment-related skill building for youth with autism. This toolkit is a product of the Service Works for Youth with Autism project. It is comprised of three briefs:

- Considering Community Service: Career Development for Youth with Autism Spectrum Disorder;
- Considering Community Service: Building Self-Determination Skills for Youth with Autism Spectrum Disorder; and
- Considering Community Service: Building Social Skills for Youth with Autism Spectrum Disorder.

WOTC Tax Credit
The Work Opportunity Tax Credit (WOTC) offers employers the ability to earn tax credit by hiring individuals with certain disabilities. Those eligible for the WOTC program include those with a disability that are completing rehabilitative services from a state-certified agency, such as Ticket to Work programs, and those who receive Supplemental Security Income. As the system moves toward more community-integrated employment options for individuals, employers can earn a tax credit between 25–40% of the new employee’s first year’s wages. Information and forms for potential employers are available on the US Department of Labor website.

ABLE Update
The Achieving a Better Life Experience (ABLE) National Resource Center (NRC) has launched its website. The ANRC website offers important information targeted toward potential beneficiaries and their families, ABLE program administrators, and financial institutions.

Information provided on the ANRC website will include:

- State-by-state ABLE development statuses;
- Side-by-side comparisons of ABLE program characteristics;
- Informational ABLE videos;
- Archived ABLE webinars;
- Published ABLE-related research;
- Summaries of ABLE-related policies, rules and regulations;
- Frequently asked questions;
- An online portal to submit ABLE-related questions; and
- ABLE announcements.

Technical Centers
The US Department of Education’s Rehabilitation Services Administration has created trainings and technical assistance centers (TAC) to assist state vocational rehabilitation agencies in providing services to individuals with disabilities. Each TAC addresses specific topics regarding improving services for those with disabilities to improve their employment, independence, and integration into the community.
Autism Awareness Month: the Blue Light Is Shining at RCPA

Join RCPA staff and members in celebrating April as National Autism Awareness Month! National Autism Awareness Month represents an opportunity to promote autism awareness, autism acceptance, and to draw attention to the tens of thousands facing an autism diagnosis each year. Nearly a quarter century ago, the Autism Society launched a nationwide effort to promote autism awareness, inclusion, and self-determination for all, and assure that each person with ASD is provided the opportunity to achieve the highest possible quality of life. Each April, RCPA hangs the symbolic blue light for autism awareness in its window and encourages its members to do the same.

Autism Service Coding and Collections Developments

The Departments of Human Services (DHS) and Insurance (PID) are again undertaking efforts to ensure that the fiscal impact goal of Medicaid cost reduction of the Autism Insurance Act (Act 62) is fully implemented. Administration staff will be meeting with commercial insurers from across the Commonwealth to review their roles and responsibilities under Act 62. As part of DHS and PID’s commitment to implementing Act 62 and the recent transition to ICD-10 codes, clinical experts at DHS examined the ASD diagnosis and procedure codes currently captured in the cost avoidance editing process and identified additional codes that DHS will add into that process. In preparation for addition of the new diagnosis and procedure codes, and to avoid disruption in service coverage for individuals, families, and providers, DHS will pay claims and recoup payment from private insurers for autism-related codes from April 15 through July 31. This will allow private insurers and providers time to add these additional codes into their processes. Beginning August 1, DHS will include the additional diagnosis and procedure codes in the cost avoidance editing process to confirm that private health insurance companies pay for services covered under Act 62.

Raising the Bar and the Challenges in the Adult Waiver Programs

The Bureau of Autism Services recently held a webinar which introduced the new qualification requirements for behavior specialists working in the Adult Autism Waiver (AAW) program. These changes will go into effect on July 1 of this year. The new requirements for AAW behavioral specialist services will be:

- A master’s degree in social work, psychology, special education, or applied behavioral analysis;
- A Pennsylvania behavior specialist license;
- A master’s degree in another field with 50% or more coursework in applied behavior analysis; or
- A master’s degree in a human services field related to social work, psychology, or special education (housed in the institution’s department or school of social work, psychology, or special education) with 33% or more coursework in applied behavior analysis.

It is not yet clear what the impact of these new requirements will be for current staff in the AAW programs or what the challenges are for behavior specialist staff retention and recruitment. Many RCPA members providing behavior specialist child-adolescent services are currently struggling with recruitment and labor shortages and curtailment in service access related to similar professional staff requirements. Members are encouraged to contact Connell O’Brien or Linda Drummond with information about how these new AAW requirements will impact staffing and service capacity.

Autism Featured in a Special Edition of Pediatrics

The American Academy of Pediatrics recently published a special supplement to the Academy’s publication Pediatrics. The 14 research and practice-based articles cover topics that range from Diagnosis of Autism Spectrum Disorder by Developmental-Behavioral Pediatricians in Academic Centers, and Assessment and Treatment of Anxiety in Youth with Autism Spectrum Disorders to Telehealth and Autism: Treating Challenging Behavior at Lower Cost and Sleep Difficulties and Medications in Children with Autism Spectrum Disorders.
Another Recommendation for Depression Screening

As many child and adolescent mental health and health care professionals saw, the US Preventive Services Task Force recently published their final recommendation on screening for depression in children and adolescents. The task force is an independent, volunteer panel of national experts in prevention and evidence-based medicine, that works to improve the health of all Americans, by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications. The task force, as have many health care policy, practice, and research groups, recommends screening for major depressive disorder in adolescents ages 12 to 18. “Primary care clinicians can play an important role in helping to identify adolescents with major depressive disorder and getting them the care they need. Accordingly, the task force recommends that primary care clinicians screen all adolescents between 12 and 18 years old for this condition,” says task force member Dr. Alex Krist.

RCPA Welcomes New OMHSAS Leadership

On March 15, members of the RCPA Children’s Steering Committee met with the newly appointed Bureau Director for Children’s Behavioral Health Services, Shannon Fagan, and the newly appointed Office of Mental Health and Substance Abuse Services (OMHSAS) Director of Policy and Planning, Sherry Peters. Although it was only their seventh day in their new positions, Shannon and Sherry spent a considerable amount of time meeting with RCPA leadership and committee members, discussing current issues and ways that they and RCPA can fulfill Secretary Dallas’ commitment to a more collaborative and constructive stakeholder process in governing and managing child-adolescent behavioral health services. Many of the RCPA staff and members have had a long and productive working relationship with both Peters and Fagan in their prior roles and welcome this opportunity to work with them in advancing mental health service system improvement and innovation.

Children’s Committee Meeting and Webcast

The RCPA Children’s Committee meeting will be held on the afternoon of April 13, at the association’s Penn Grant Centre facilities in Harrisburg. In addition to policy and practice updates, legislative updates, and our always lively exchange of ideas, Dr. Gordon Hodas will join us. Dr. Hodas worked closely with colleagues at the Department of Human Services, as well as the Psychiatric Society and Academy of Pediatrics, to craft an array of guidelines, consultation supports for primary care providers, and other tools to help improve prescribing practices for children and adolescents. Registration for both onsite and webcast participation is available online.

Improving Medication Management for Children

The Pennsylvania Department of Human Services (DHS) has begun to implement several new initiatives to reduce the use of psychotropic medication among our state’s most vulnerable children. Speaking at The Children’s Hospital of Philadelphia (CHOP), DHS Secretary Ted Dallas noted that, “The recommendations and analysis from the CHOP PolicyLab provide Pennsylvania with an invaluable roadmap to improve the safety and quality of life for foster children served by the Medicaid system.” Members from the Pennsylvania Chapter of the American Academy of Pediatrics and the Pennsylvania Psychiatric Society collaborated with DHS to develop the following actions in the Medicaid system:

- Best practice guidelines for clinicians regarding comprehensive assessments of behavior and treatment interventions;
- Managed care organizations will be required to give prior authorization for antipsychotic medications for children;
- An electronic dashboard for DHS to monitor what medications children are taking and improve care coordination;
- DHS will open a telephonic child psychiatric consultative service to help to appropriately prescribe psychotropic medication for children; and
- The department will begin training child welfare caseworkers and caregivers on the appropriate use of psychotropic medication.
OCDEL Names New Leadership for Early Intervention

Carl Beck has returned to the Office of Child Development and Early Learning (OCDEL) to serve as director for the Bureau of Early Intervention Services. Before retiring from the Commonwealth, Carl was the OCDEL chief of the Division for Eastern Operation and Monitoring in the Bureau of Early Intervention Services and had also served as acting director. Carl has over 35 years of experience supporting children and adults with intellectual and developmental disabilities. Prior to his retirement and now his return to OCDEL, Carl also participated in the PCPA Early Childhood Mental Health Work Group and the state’s Early Childhood Mental Health Advisory Council. RCPA and its members working with young children welcome Carl’s return to OCDEL and his appointment to this important leadership role.

Updates From the School Services Work Group

Last month, nearly 60 RCPA members, providers, educators, and managed care representatives gathered online and at Elwyn in the Southeast region for the RCPA School-Based Services Work Group. The group focused on strategies for expanding work group involvement by schools that partner with our members, models and approaches for school-based mental health services, and tools for measuring levels of need and intervention outcomes. The work group also featured a presentation by Dr. Perri Rosen, who provided the group with an update on the school mental health focused, Student Assistance Program collaboration, along with the state’s Garrett Lee Smith Memorial youth suicide prevention grant.
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<tr>
<th>Date</th>
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<tr>
<td><strong>APRIL</strong></td>
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<tr>
<td>Thursday, April 7</td>
<td>9:00 am – 10:00 am</td>
<td>Government Affairs Committee Conference Call</td>
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<td>Thursday, April 7</td>
<td>12:00 pm – 1:00 pm</td>
<td>IPRC Webinar: Enhancing Wellness in a Complex Chronic Care Setting</td>
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<td>Drug &amp; Alcohol Committee Penn Grant Centre</td>
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<td>RCPA Capitol Day</td>
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<td>Tuesday, April 12</td>
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<td>IPRC Advocacy, Education &amp; Membership Committee Conference Call</td>
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<td>Wednesday, April 13</td>
<td>9:30 am – 12:00 pm</td>
<td>Mental Health Committee Penn Grant Centre</td>
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<td>Criminal Justice Committee Penn Grant Centre</td>
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<td>Children’s Committee Penn Grant Centre</td>
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<td>9:30 am – 4:00 pm</td>
<td>Intellectual/Developmental Disabilities – The Wave of the Future Penn Grant Centre</td>
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<td>Thursday, April 14</td>
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<td>Tuesday, May 10</td>
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<td>Thursday, May 12</td>
<td>10:00 am – 12:30 pm</td>
<td>Outpatient Rehabilitation Committee RCPA Conference Room</td>
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<td>IPRC Outcomes &amp; Best Practices Committee Conference Call</td>
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<td>Tuesday &amp; Wednesday, May 17 &amp; 18</td>
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<td>RCPA Annual Membership Meeting Hershey Lodge</td>
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