RCPA Seeks Nominations for Annual Awards

RCPA will host its annual conference at the Hershey Lodge, September 24–27. At this large-scale, statewide event, the RCPA Board of Directors wants to continue the important tradition of recognizing individuals and organizations/facilities for their dedication and commitment to service. The following award categories have been created for this event and recognition:

- **Community Leadership Award** – Presented to an individual in recognition of extending service and knowledge to the community at large, and efforts in helping the community understand the needs of individuals served by RCPA members. This can be for specific or short-term significant acts, or to recognize a career-long body of work.

- **Exemplary Service to RCPA Award** – Presented to an individual or organization/facility that has shown a strong commitment and dedication in service to the association, its members, and related issues.

- **Innovation Award** – Presented to an individual or organization in recognition of significant innovation. Examples include cross-systems integration, physical/behavioral health integration, and implementation of new technologies.

- **Legislative Leadership Award** – Presented to an individual who has shown significant leadership and commitment to government affairs and legislative issues, on behalf of RCPA and its members.

- **Lifetime Achievement Award** – Presented to an individual in honor of his/her significant, consistent, and enduring contribution throughout his/her career in support and furthering of the field.

continued on page 3
Contents

1 Special Feature
3 Membership
4 2019 Conference
5 Government Affairs
7 Federal News
8 State News
9 Medical Rehabilitation
10 Brain Injury
11 Physical Disabilities & Aging
12 Mental Health
13 Drug & Alcohol
14 IDD
17 Children’s Services
18 Calendar

©2019. This monthly newsletter is written by the Rehabilitation and Community Providers Association (RCPA) for the health and human services communities. Deadline for publication is the 20th of every month or the Friday before.
Members in the News

- The Need for Behavioral and Mental Health Services Never Has Been Greater – letter to the editor from Mike Hopkins, Children’s Service Center, published in the Scranton Times-Tribune
- RCPA Member Skills of Central PA Receives Gold Award for Health Leadership Excellence
- Funding Shortage for State Agency Could Affect Thousands of Pennsylvanians With Disabilities (RCPA Member ACHIEVA’s Steve Suroviec Quoted in Article)
- Goodwill Keystone Area Summer Youth Employment Manager Recognized for Her Determination and Commitment to Serve Others
- Former Chief Counsel for the PA Department of Drug and Alcohol Programs (DDAP) Joins Post & Schell’s Health Care Practice Group as Principal

Join Us For Pennsylvania ID/A Provider Hill Day June 18 in Washington, DC

At this time, RCPA is accepting nominations through an open solicitation of members (e.g., designated contacts, CEOs/executive directors, staff) and RCPA committees. Members may nominate one or more individuals/organizations in one or more categories. Nominations will be reviewed by a sub-group of the board of directors to make recommendations for final selection and approval by the full board.

Include the name/organization (if applicable) of the nominee, the award category, and a statement about why you believe the individual/organization should be honored. **Nominations should be made by Monday, June 10, 2019.** Please send nominations and/or inquiries to Linda Kaufmann.

Award recipients are not limited to RCPA members and every award may not be presented annually. Please join the association in continuing this tradition and in offering nominations for those who deserve recognition for their significant contributions.

As the largest state association of its kind, RCPA continues to look for ways to strengthen its voice. One way to facilitate this is by the recruitment of new members. For new provider members, there is a discount for the first year of membership. If you have questions about membership or know of an organization that would benefit from membership with RCPA, please contact Tienanna Lloyd, Accounts Receivable/Membership Services Manager.

NEW MEMBERS

PROVIDER
SE Region
Community Links
20 Russell Blvd
Bradford, PA 16701
Pamela FinGado, Executive Director

Visit the [RCPA website](#) for up-to-date information on legislation, meetings, trainings, and other industry developments.
Make An “Impact” at the 2019 RCPA Annual Conference

Join RCPA as we host our 2019 conference, September 24–27 at the Hershey Lodge. RCPA staff and the Conference Committee are excited to release this year’s Sponsors, Exhibitors, and Advertisers brochure, with new opportunities to get in on the action. New this year, based on requests from our previous sponsors and exhibitors, is booth self-selection — in order to be considered for self-selection, a completed contract with payment must be submitted. Booth selections are contingent upon availability.

Don’t miss your chance to be seen and to support the work of this dynamic organization! This event is a highlight for the Pennsylvania mental health, drug and alcohol, intellectual and developmental disabilities, children’s, brain injury, medical/vocational rehabilitation, and physical disabilities and aging provider communities. Complete information about exhibiting, sponsoring, and advertising options are available from the link above.

Sponsor, Exhibit, and Advertise

Exhibit activities take place September 25–26. Based on your feedback from last year, we have increased the number of activities offered throughout the event. RCPA encourages all interested parties to complete the contract now! Events within Exhibit Hall include an opening reception, breakfast, coffee breaks, lunch, and prize giveaways. Exhibit hours occur during the two busiest days of the conference, increasing the opportunity for exhibitors — an integral component to conference success — to interact with the maximum amount of attendees. A “Best of Show” competition provides even more prospects to engage guests and winners receive a discount on 2020 exhibit rates.

Interaction with conference guests outside of the exhibit area is just as important! Participating in other conference events such as receptions, meals, and educational offerings provides exhibitors greater potential and flexibility to establish opportunities for business. RCPA includes two exhibitor registrations with the exhibit fee; since exhibitors can attend the entire conference, RCPA encourages organizations to use those registrations fully.

Exciting New Sponsorship Opportunities

The association is privileged to have the backing of the finest organizations in the field for our conference. Through the use of sponsorship circles, RCPA is able to honor all supporting organizations. Within each sponsorship circle, specific events and items such as meals, receptions, conference tote bags, attendee materials, etc. are available, providing additional “naming recognition” for sponsors. Other ideas are welcome as well. Please review sponsorship materials and contact Sarah Eyster to reserve your opportunity.

Sign Up Now

The deadline for inclusion in all digital material is July 26, 2019. Sponsors, exhibitors, and advertisers who wish to be listed on the website, the mobile app, and in the online conference program must adhere to that deadline.

The association looks forward to welcoming you at the conference! Space and opportunities are reserved on a first-come, first-served basis and no reservation is considered complete without payment. For any additional questions, please contact Sarah Eyster, Conference Coordinator.
RCPA Holds Its Annual Capitol Day

On Wednesday, May 1, RCPA held its annual Capitol Day. During the day, RCPA members met with legislators and rallied to support human service programs and initiatives that help millions of Pennsylvanians annually.

Atop RCPA’s legislative agenda is preserving the behavioral health care delivery model. Under the current system, Pennsylvania’s behavioral health system has delivered needed, even lifesaving, mental health and drug and alcohol services to patients and families in need. But a new plan in Harrisburg to “carve in” those services by returning them to large physical health managed care organizations would affect care available to 2.9 million Pennsylvanians who need help with mental health or substance use disorder challenges.

Another key issue for RCPA members is preserving long-term support services and employment opportunities for individuals with developmental disabilities. Several proposed policy changes inadvertently jeopardize community and employment opportunities for these individuals.

The Community Participation Support model incentivizes providers to engage small groups of the individuals they serve in community activities for developing employment skills, and the Employment First policy requires individuals to explore competitive integrated employment before considering other day activities. While RCPA members support community integration and competitive employment, it is imperative to maintain individual choice for those who access these programs and services.

RCPA members also focused on the Commonwealth’s need to modernize its regulatory processes. The current regulatory process is broken and complicated. When regulatory change takes an inordinate amount of time to implement, there is the risk that changes are no longer relevant, and time, money, and needed services have been lost in the interim.

Adopting new processes and timelines can help ensure the process is inclusive and not delayed. Including stakeholders in a streamlined, transparent process of creating and reviewing proposed regulations can help avoid confusion and misguided regulations while ensuring that new regulations demonstrate value for the person receiving services.

RCPA also addressed key budget concerns, including sufficient funding for health and human service providers, supporting individuals and families with disabilities, supporting direct support professionals and providers, minimum wage changes, and fighting the opioid epidemic.

For more information about RCPA’s Capitol Day, 2019/20 budget recommendations for health and human services, or legislative priorities, visit the RCPA website or contact RCPA Government Affairs Director Jack Phillips.

RCPA PAC Needs Your Help!!

Now, more than ever, health and human service providers need to be proactive in helping elected officials work towards common sense solutions in the areas of workforce, tax, regulation, health care, and human services.

The RCPA PAC raises money and supports campaigns of state legislators who work tirelessly on issues that benefit mental health, intellectual disabilities, children’s services, substance use disorder treatment and services, brain injuries, medical and vocational rehabilitation, physical disabilities and aging, 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.

Interested in learning about more fun ideas to raise money for RCPA-PAC or interested in donating now? Please visit our website, download the PAC FAQ Card, Donation Card, or email Jack Phillips, RCPA Director of Government Affairs.

Your participation in the RCPA PAC is completely voluntary and you may contribute as much or as little as you choose. Donations are not tax-deductible and will be used for political purposes. You may choose not to participate without fear of reprisal. You will not be favored or disadvantaged by reason of the amount of your contribution or decision not to contribute.
House Appropriators Pass FY 20 Health Spending

(Source: Stephanie Pasternak, National Council for Behavioral Health, Capitol Connector, May 9, 2019)

The House Appropriations Committee approved its Labor-HHS budget for Fiscal Year 2020 on Wednesday [May 8], funding key federal health, education, and labor programs for the year ahead. The Substance Abuse and Mental Health Services Administration (SAMHSA) saw increases of $115 million to its programming which includes level funding for several key programs as well as new funding for the Community Mental Health Services Block Grant and substance use disorder workforce initiatives. The appropriations bill now heads to the House floor for consideration and a vote.

See the chart below for a summary of behavioral health funding levels:

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2020 Funding</th>
<th>FY 2020 vs FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse and Mental Health Services Administration (SAMHSA)</td>
<td>$5.9 billion</td>
<td>+$115 million</td>
</tr>
<tr>
<td>National Institutes of Health (NIH) Overall funding</td>
<td>$41.1 billion</td>
<td>+$2 billion</td>
</tr>
<tr>
<td>Community Mental Health Services Block Grant</td>
<td>$757.6 million</td>
<td>+$35 million</td>
</tr>
<tr>
<td>Substance Abuse Prevention and Treatment Block Grant</td>
<td>$1.9 billion</td>
<td>Level funding</td>
</tr>
<tr>
<td>Promoting the Integration of Primary and Behavioral Health Care (PIPBHC) Grants</td>
<td>$49.9 million</td>
<td>Level funding</td>
</tr>
<tr>
<td>PIPBHC Technical Assistance and Training Center</td>
<td>$2 million</td>
<td>Level funding</td>
</tr>
<tr>
<td>Mental Health First Aid</td>
<td>$20.9 million</td>
<td>Level funding</td>
</tr>
<tr>
<td>State Opioid Response (SOR) Grants</td>
<td>$1.5 billion</td>
<td>Level funding</td>
</tr>
<tr>
<td>Certified Community Behavioral Health Clinic (CCBHC) Expansion Grants</td>
<td>$150 million</td>
<td>Level funding</td>
</tr>
<tr>
<td>Loan Repayment Program for Substance Use Disorder Treatment Professionals (authorized by 2018 SUPPORT Act)</td>
<td>$25 million</td>
<td>+$25 million</td>
</tr>
</tbody>
</table>

Notably, the House’s proposed budget includes funding for the Substance Use Disorder (SUD) Workforce Loan Repayment Act, legislation that was introduced as a result of education and advocacy by the National Council and the Association for Behavioral Healthcare in Massachusetts. This law created a new loan forgiveness program specifically for SUD professionals in order to create incentives for students to pursue SUD treatment careers and increase treatment capacity. The National Council applauds House appropriators for supporting funding for this important initiative.

NEXT STEPS

Despite the progress in moving appropriations bills through the House committee process, there remains great uncertainty as to how the House and Senate will address impending budget caps. Prior to finalizing a budget for FY 20, lawmakers must clear a measure to increase the budgetary spending caps mandated by the Budget Control Act (BCA) of 2011 or face $125.7 billion in spending cuts that would automatically be triggered via a process known as sequestration.
RCPA’s Legislative Tracking Report
RCPA is constantly tracking various policy initiatives and legislation that may have positive or negative effects on our members and those we serve — so for your convenience, RCPA has created a legislative tracking report. You can review this tracking report to see the legislative initiatives that the General Assembly may undertake during the 2019/20 Legislative Session. If you have questions on a specific bill or policy, please contact Jack Phillips, RCPA Director of Government Affairs.

Federal News

Primary Cares Initiative: Empower Patients & Providers to Drive Better Value & Results
The Centers for Medicare and Medicaid Services (CMS) recently announced the Primary Cares Initiative, which includes a new set of payment models that will transform primary care to deliver better value for patients throughout the healthcare system. The initiative will seek to reduce administrative burdens and empower primary care providers to spend more time caring for patients while reducing overall health care costs. The initiative will be administered through the Center for Medicare and Medicaid Innovation (CMMI) under two paths: Primary Care First (PCF) and Direct Contracting (DC). The PCF payment models are focused on individual primary care providers, while the DC payment model options target a wider range of organizations that are capable of tending to larger patient populations and are experienced in handling financial risk, such as Medicaid managed care organizations, accountable care organizations, and Medicare Advantage plans. The PCF models will be tested for five years and are currently scheduled to begin in January 2020. The DC models are expected to launch for a performance period in January 2021. Additional information is provided on the CMS website, including dates/times for webinars for interested stakeholders.

CMS to Hold Post-Acute Care QRP Call
The Centers for Medicare and Medicaid Services (CMS) will conduct a call on Wednesday, June 5, 2019, from 2:00 pm – 3:30 pm that will focus on the post-acute quality reporting programs (QRP). CMS will focus on the reporting requirements and resources for the inpatient rehabilitation facility (IRF), long-term care hospital (LTCH), and skilled nursing facility (SNF) QRPs. Additional topics include data submission requirements and deadlines, annual payment update requirements, reconsideration process, and reports. Registration to participate in the call will close at 12:00 pm on June 5 or when it is full.
CMS Letter to State Medicaid Directors Describes New Opportunities for Dual Eligibles

On April 24, 2019, the Centers for Medicare and Medicaid Services (CMS) sent a letter to State Medicaid Directors, describing three new opportunities to test state-driven approaches to integrating care for dually eligible individuals. The letter highlights new ways to better serve the complex needs of dually eligible individuals while also lowering costs and administrative burdens.

OLTL Announces Service Coordination Face-to-Face Training

The Office of Long-Term Living (OLTL) will be offering two, one-day classroom training sessions for Service Coordinators (SCs). As a prerequisite to these trainings, attendees must have completed the three OLTL Online SC modules. The modules provide a strong foundation on the basics needed to fulfill SC requirements. Attendance at these sessions will be limited to SCs (not supervisors or directors), and to two attendees per agency. Preference will be given to new SCs hired in 2017 and 2018. Additional registrations will be considered on a first-come, first-served basis.

The sessions will be held from 8:00 am to 4:30 pm each day on the following dates/locations:

**Tuesday, June 4, 2019 in Bethlehem**
Best Western Lehigh Valley Hotel & Conference Center
300 Gateway Drive
Bethlehem, PA 18017

**Thursday, July 25, 2019 in Meadville**
Active Aging
1034 Park Avenue
Meadville, PA 16335

You must register in order to attend one of these sessions by visiting this web page and completing the registration form. If you have any questions regarding registration, please contact Dering Consulting at 717-234-0567.
CMS Issues Correction to FY 2020 IRF PPS Proposed Rule

The Centers for Medicare and Medicaid Services (CMS) identified a typographical error in the publication of the fiscal year (FY) 2020 inpatient rehabilitation facility prospective payment system (IRF PPS) proposed rule that was published in the April 24, 2019 Federal Register. The error was in the calculation of the estimated burden for the IRF quality reporting program (QRP).

On page 17329 of the proposed rule it states, “Specifically, we believe that there will be an addition of 7.4 minutes on admission, and 11.1 minutes on discharge, for a total of 8.9 minutes of additional clinical staff time to report data per patient stay.” This sentence should have stated, “Specifically, we believe that there will be an addition of 7.8 minutes on admission, and 11.1 minutes on discharge, for a total of 18.9 minutes of additional clinical staff time to report data per patient stay.”

The final values and the overall burden proposed in the rule are correct despite these minor typographical errors. CMS will correct the figures in the final rule. A technical correction will not be issued due to the nature of the errors.

DMEPOS Competitive Bidding Timeline & Bid Window for Round 2021 Announced

The Centers for Medicare and Medicaid Services (CMS) announced the timeline for the registration and bid window for Round 2021 of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding program. The bid window was originally scheduled to open in June 2019, but was moved to July 2019 to allow more time for preparation. Providers are encouraged to attend the webcasts and access education materials on the Competitive Bidding Implementation Contractor (CBIC) website.

CMS Updates List of DMEPOS Items That Require Prior Authorization as Condition of Payment

The Centers for Medicare and Medicaid Services (CMS) published a document in the April 22, 2019 Federal Register that announces the addition of twelve (12) Healthcare Common Procedure Coding System (HCPCS) codes to the list of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) items that require prior authorization as a condition of payment. Phase one of implementation is effective on July 22, 2019 and phase two is effective on October 21, 2019.

CMS Changes Assessment Submission Timeframe for IRF QRP

The Centers for Medicare and Medicaid Services (CMS) announced that the timeframe for the submission of patient assessment records for the inpatient rehabilitation facility quality reporting program (IRF QRP) will be lowered from 36 months to 24 months from the assessment target date. The change applies to new, modified, and inactivated records and will take effect on October 1, 2019.

CMS Releases IRF-PAI Manual Version 3.0

On April 30, 2019, the Centers for Medicare and Medicaid Services (CMS) released the inpatient rehabilitation facility patient assessment instrument (IRF PAI) version 3.0 manual and accompanying change table. The information can be found in the “Downloads” section of the website.
Draft Guidance Issued by FDA on Brain-Computer Interfaces

The US Food and Drug Administration (FDA) released a draft guidance to assist with the development of Brain-Computer Interfaces (BCI) devices to be used for patients with paralysis or amputation. A BCI is a computer-based system that acquires brain signals, then analyzes and translates them into commands which are relayed to an output device to carry out a particular action.

BIAA Announces Upcoming Webinars

The Brain Injury Association of America (BIAA) has posted their upcoming live webinars, including:

- Status of State Concussion Legislation in the US;
- Multidisciplinary Concussion Clinics: State of the Practice;
- Managing Impulsivity in the Community: Tips and Strategies for Families;
- Implementing Guidelines and Best Practices in Clinical Settings;
- How to Use Apps and Strategies in the Real World;
- The Challenge of Brain Injury in Older Adults;
- Employment and Accommodation After Brain Injury;
- Cultural Competency in Rehabilitation;
- Supported Decision Making and Independence After Brain Injury; and
- Psychological Risk Factors for Persistent Post-Concussive Symptoms.

Researchers Study TBI Long-Term Effects & Solutions

An article in The Register-Herald highlighted a study that researchers at West Virginia University (WVU) are doing on the long-term effects and solutions for individuals with traumatic brain injuries (TBI). Cole Vonder Haar, Assistant Professor of Behavioral Neuroscience in the WVU Department of Psychology, received a five-year $989,210 award from the National Institutes of Health (NIH) to investigate potential treatments for psychiatric deficits arising from chronic TBI. The study is scheduled to begin in June 2019.
Resources for Culturally and Linguistically Competent Long-Term Services and Supports

From NASUAD Friday Update – May 3, 2019
(National Association of States United for Aging and Disabilities)

Resources for Integrated Care has resources available that describe culturally and linguistically competent promising practices and case studies relevant to a wide variety of long-term services and supports (LTSS) settings. These resources provide information to help providers and plans address disparities minority groups often experience in access, quality, and outcomes in LTSS. Meeting the cultural and linguistic needs, values, and preferences of individuals can help address disparities.

Resources available include:

- A webinar that describes strategies plans and providers can use to identify LTSS preferences, values, and needs of members from diverse cultural backgrounds. Presenters also describe effective approaches for providing LTSS and training the LTSS workforce. Click here to access a recording of the webinar.

- A spotlight profile that describes culturally competent LTSS programs at Keiro Northwest, including assisted living and skilled nursing facilities, and home care and adult day programs. The profile also discusses how they incorporate architecture, décor, food, activities, and community connections to meet participants’ needs and preferences. Click here to access the spotlight profile.

- A resource compendium for providers and health plans interested in enhancing capacity to provide and coordinate culturally competent LTSS. The compendium includes reports, guides, tools, and trainings applicable to a range of settings. Click here to access the culturally competent LTSS resource compendium.

- A compendium for providers with resources about enhancing their capacity to provide culturally competent LTSS for LGBT individuals. Click here to access the culturally competent LTSS for LGBT individuals resource compendium.

Financial Empowerment Conference for Individuals with Disabilities

Pennsylvania Assistive Technology Foundation (PATF) is holding its first financial empowerment conference for people with disabilities on October 3, 2019 in Harrisburg. “Vision for the Future” will bring together individuals with disabilities, family members, service providers, nonprofit organizations, and policymakers to discuss, collaborate, and learn about financial education. The conference is a one-day, free, accessible event open to the public. As programs move to help individuals with disabilities achieve greater independence, we need to incorporate financial capability into programs or we will not be building a future where individuals with disabilities will have the tools they need to plan for their own financial futures. Registration is required. A limited number of scholarships are available to people with disabilities and their families to help defray the cost of travel and lodging. The full agenda and registration link will be posted here by June 15, 2019.

CHC Corner

The Office of Long-Term Living (OLTL) continues to roll-out Community HealthChoices (CHC) in the Southeast Region, as it prepares to implement services in the remaining counties on January 1, 2020. The May 3, 2019 Managed Long-Term Services and Supports Medical Assistance Advisory Committee (MLTSS MAAC) meeting included quality metrics through the first quarter of 2019. Read the report at this link. General information about CHC is available here.

Resource Available for Military

The National Resource Directory has more than 14,000 vetted resources available for the military, veterans, and families including employment, family and caregiver support, education and training, and health. Organizations that provide services can submit a resource for inclusion.
Mental Health

PA Certified Community Behavioral Health Clinics (CCBHCs) Directed to Shut Down

On May 10, the six CCBHC providers operating seven clinics had a call with the Office of Mental Health and Substance Abuse Services (OMHSAS), at which time the directive to transition CCBHC consumers was given. Due to there being no current federally funded expansion, PA has stated that there are no funds to operate the clinics after June 30. RCPA and the centers have requested assistance from the governor’s office to keep the program going or, at the very least, allow for a reasonable transition time.

More than 20,000 new consumers began using CCBHCs throughout the demonstration funds which began July 1, 2017. This directive to close the clinics and transition consumers in less than six weeks is onerous. It means trying to find clinically appropriate places to send people, including those battling an opioid addiction, as the CCBHCs also offered Medication Assisted Treatment (MAT). RCPA and the CCBHCs have asked what happens if the federal government approves funding for the continuation and staff has been laid off, consumers transitioned, and clinics closed. Given the number of consumers receiving services from the CCBHCs, and the number of staff affected by this closure, RCPA is advocating for continued funding past June 30 to ensure responsible transitions.

Pennsylvania CCBHC Clinics and RCPA Staff Met With Federal Leaders to Request Funding Extension

Three CCBHC clinics and RCPA Director of Mental Health Sarah Eyster attended a national CCBHC rally event offered through the National Council. There were more than 15 states represented.

The group attended the Washington Post Live Event, entitled Mental Health and Wellness. The event featured Senators Stabenow and Blunt, co-sponsors of the CCBHC extension/expansion legislation, along with award-winning actress Glenn Close. Following that, the group went to Capitol Hill to meet with several Pennsylvania Representatives and Senate staff, asking for bi-partisan support for the expansion/extension. Additionally, the National Council offered templates for all CCBHCs across the country to send as a follow-up to the meetings.

The main quote of this event was, “How do you go back to the previous fragmented system when you know there is something much better to improve the health of the people who need mental health and substance abuse recovery oriented care?” RCPA will keep members informed of any additional developments.

Psychiatric Outpatient Regulation Update

During a recent meeting with OMHSAS, RCPA staff learned that the outpatient regulations are heading to the Independent Regulatory Review Commission (IRRC). As of this writing, the regulations have not yet been added to the June agenda.

ACT 25 of 2018 Use of Physician Assistants (PA) and Certified Registered Nurse Practitioners (CRNP)

Questions have been asked of the Office of Mental Health and Substance Abuse Services (OMHSAS) relating to providing guidance around this legislation. As of now, RCPA understands that Act 25 applies to CRNPs and PAs who will be providing part of the required psychiatric time at a psychiatric outpatient clinic.

If the CRNP or PA is providing services under their current scope of practice and will not be providing part of the psychiatric time, there is no requirement for an additional mental health certification. If a provider has specific questions regarding qualifications for a staff member, please contact the Bureau of Community and Hospital Operations at 717-705-8395.
Drug & Alcohol

Criminal Justice Survey

RCPA is requesting members to complete this brief survey by Friday, June 7, in order to learn more about the various criminal justice services being provided among the RCPA membership. It is also intended to request suggestions for the RCPA Criminal Justice Committee. The Criminal Justice Committee was founded 24 years ago by Charlie Folks, long-time RCPA member and leader. Important advocacy work has occurred over the years that has resulted in positive outcomes for the clients we serve. To mention just a few, after years of advocacy, the Department of Corrections (DOC) now provides an ID card for everyone leaving the DOC. This may seem simple, but it has made a huge difference in helping clients access services. RCPA also advocated strongly for assessments and medical assistance enrollment to be completed behind the walls so that offenders leaving DOC have medical assistance available to them upon release.

RCPA has been extremely active in our efforts to improve mental health services and services for substance use disorders for individuals involved in the criminal justice system. In addition, RCPA has provided strong advocacy when programs were being threatened. None of these accomplishments would have been possible without our strong working relationships/partnerships with DOC and Secretary John Wetzel, Probation and Parole, the Sentencing Commission, OMHSAS, DDAP, and others. The Criminal Justice Committee meets five times a year in the RCPA office in Harrisburg, with call-in access also available. All interested members are encouraged to complete the survey and attend the next meeting scheduled for June 12. Contact Lynn Cooper, RCPA Drug & Alcohol Division Director, with questions.

RCORP-Medication-Assisted Treatment Expansion (HRSA-19-102)

The Health Resources and Services Administration’s (HRSA) Federal Office of Rural Health Policy (FORHP) has released a Notice of Funding Opportunity (NOFO) for a new Rural Communities Opioid Response Program (RCORP) initiative called RCORP-Medication-Assisted Treatment Expansion (HRSA-19-102). HRSA plans to invest approximately $8 million in rural communities as part of this funding opportunity. Successful RCORP-Medication-Assisted Treatment (MAT) Expansion award recipients will receive up to $725,000 for a three-year period of performance, to establish or expand MAT in eligible hospitals, health clinics, or tribal organizations located in high-risk rural communities. The funding opportunity can be found at this link.

IRETA June Webinar

Wednesday, June 19, 2019 at 2:00 pm ET

Integrating CBT, ACT & Mindfulness-Based Therapy for the Treatment of Substance Use Disorders

Led by Nick Szubiak, LCSW. With a focus on cognitive behavioral, mindfulness, and acceptance and commitment therapeutic techniques, the goal of this webinar is to support education and concrete skill development that providers can use for patients with SUDs.

REGISTER HERE
RCPA Participates in Legislative Roundtable Discussion

On May 1, RCPA gave a presentation to members of the House Republican Policy Committee regarding the inadequate rates proposed by the Department of Human Services (DHS) Office of Developmental Programs (ODP) for the Community-Based Services Program. RCPA President/CEO Richard S. Edley, PhD, RCPA IDD Division Director Carol Ferenz, Venango Training & Development Center CEO Colleen Stuart, and Wesley Family Services Director of Public Policy Will Stennett had the opportunity to discuss the impacts of ODP’s decision to require all providers to take the individuals that they serve out of the facility at least 25% of the time by July 1, 2019. Currently, providers are reaching approximately 19% community time for those they serve who are interested in leaving the facility. The remainder of the service time is spent in a facility where individuals participate in work, vocational, or recreational activities with their peers and staff supervision.

Since the roundtable discussion, RCPA has been informed by ODP that the following timelines are now going to be followed.

- In July of 2019 providers are to calculate their percent of time that services are provided in the community (excluding individuals who have a variance). If they have not met the goal of 25%, they should develop a plan to increase the percentage.
- In July of 2020, providers will be expected to assess their progress since 2019.
- If they have not achieved 25% community time, they will need to develop a Corrective Action Plan by October 2020 to submit to the department.
- If a provider has not met the goal by January of 2021, they will be required to follow a Directed Corrective Action Plan.
- By March of 2022, all providers of service must be in compliance.

For more information about RCPA’s position on ODP’s Community Participation Support Services proposal, visit the RCPA website.

ODP Seeking Public Comment on Policy Areas

The Office of Developmental Programs (ODP) recently published 55 Pa. Code Chapter 6400 Regulatory Compliance Guide (RCG) for review and comments. The RCG will serve as a companion piece to the updated version of Chapter 6400 regulations for Community Homes for Individuals with an Intellectual Disability or Autism that will be released concurrently with the Chapter 6100 regulations. Comments will be accepted until 5:00 pm on June 21, 2019. RCPA staff are organizing a work group of members to develop comments. All interested members are encouraged to contact Carol Ferenz to participate in this group.

Additionally, ODP released the Incident Management Bulletin for public comment. This bulletin specifies the operating procedures and directions for the Incident Management process. The processes include uniform practices for building organizational policies and structures, taking timely and appropriate actions in response to incidents, reporting and investigating incidents, and taking corrective actions that mitigate risk and decrease the chance of future occurrences of a similar incident. Detailed responsibilities are outlined for Providers, SCOs, and County ID programs/AEs. Comments on this draft will be accepted until 5:00 pm on July 5, 2019. RCPA will be working with members to develop comments. All interested members are encouraged to contact Carol Ferenz to participate in this group.

US Department of Labor Section 14(c) Online Dialogue Open

The US Department of Labor’s Office of Disability Employment Policy (ODEP), through its ePolicyWorks initiative, is hosting this national online dialogue to gather perspectives on Section 14(c) of the Fair Labor Standards Act. Please share your ideas, individual stories, and personal experiences illustrating the impact of Section 14(c) on the employment of people with disabilities.

We strongly encourage members to go online and submit your experiences, as well as your thoughts regarding the future of the operation of Section 14(c) facilities in Pennsylvania. To comment, follow this link.

For more information about RCPA’s position on ODP’s Community Participation Support Services proposal, visit the RCPA website.
A Plan to Address Direct Care Workforce Concerns in Pennsylvania

Pennsylvania’s Long-Term Care Council (LTCC) recently released its Blueprint for Strengthening Pennsylvania’s Direct Care Workforce — a culmination of more than a year of work by the council and its committees to propose how to best address the Commonwealth’s escalating direct care workforce crisis.

The recommendations developed by the council and its four committees — Access, Outreach, Quality, and Workforce — are the result of dialogue with direct care workers, consumers, providers, managed care health plans, and workforce experts, and reference previously completed reports. For example, one of the reports that the council referred to is the 2007 report Addressing Pennsylvania’s Direct Care Workforce Capacity: Primary Recommendations for Quality Jobs and Quality Care. This report called for a minimum starting wage of $12 an hour for all direct care workers by 2010, as well as a statewide training and credentialing system, career pathways, workforce data collection, and a public education campaign. In addition, the Pennsylvania Long-Term Care Commission 2014 report recommended a certification program for direct care workers in all LTSS settings as well as exploring the use of technology and shared living arrangements.

While most of the recommendations in previous reports have not been acted upon, the gravity of the direct care worker shortage and turnover in Pennsylvania is serious and growing. All Pennsylvanians will be impacted by this crisis, either now or in the future, and everyone has a vested interest in seeing that the following recommendations are implemented if we are to build a stable and robust workforce to meet the needs of our citizens.

The goals/recommendations in this report include:

- **Raise awareness of the important role of direct care workers in serving older adults and individuals with disabilities, and the link between a strong workforce and access to / quality of long-term services and supports.** Create a statewide public awareness campaign and targeted events to emphasize both the need to recruit and retain more workers and the value of these professionals.

- **Better equip direct care workers to meet the challenges of the profession, while providing opportunities for career development and advanced roles** by establishing a standardized core training and credentialing system for direct care workers, which provides career pathways throughout the system. Explore financial assistance through the state and local workforce development system, and request that the Centers for Medicare and Medicaid Services (CMS) allow training to be a billable service under Medicaid for home and community-based service (HCBS) providers. The Wolf Administration clarified the types of non-skilled services and activities that direct care workers can perform in HCBS settings. This specialized care includes assistance with bowel and bladder routines, assistance with medication, ostomy care, clean intermittent catheterization, assistance with skin care, and wound care. The Commonwealth should ensure that HCBS providers have access to training on these additional tasks so that they can fully utilize the skills and knowledge of direct care workers to help consumers live independently.

- **Provide direct care workers a living wage to help meet their basic needs, thus enabling more individuals to enter and remain in the professions.** Establish a minimum starting wage of $15 an hour for direct care workers by 2025, with annual increases thereafter indexed to inflation. Establish a $12-an-hour minimum starting wage for all direct care workers beginning with the Fiscal Year 2019/20 state budget, increasing by 50 cents each year until reaching $15 an hour in 2025, and adjusted for inflation annually thereafter. Raise Medicaid reimbursement rates and other state-supported payments for providers across the LTSS continuum in parallel with the minimum wage increases via “wage pass-throughs.”

- **Quantify the impact of direct care worker shortages/turnover and strategies to strengthen the workforce and improve consumer outcomes.** Implement standardized data tracking, reporting, and training of direct care workforce quality indicators across long-term services and supports (LTSS) settings.

- **Enhance workplace culture and consumer outcomes by fully utilizing the skills and knowledge of direct care workers.** Require integration of direct care workers into person-centered planning teams.

- **Expand the availability and coverage of technology supports for both direct care workers (e.g., electronic devices/applications, work safety equipment, etc.) and continued on page 16**
IDD

continued from page 15

participants (e.g., assistive technology tools and devices, including safety and security devices/applications, devices/applications to reduce social isolation, seat lifts, etc.). This can be accomplished by improving the dissemination of information on technology for direct care and providing greater investment in existing state-supported programs, including TechOWL, PATF, and OVR, to support the financing of technology for older adults and individuals with disabilities served by the Department of Human Services and/or the Department of Aging through LTSS. Program goals should target technology applications for enhanced self-care, safety, security, and independence. Also recommended is investment in state broadband access to ensure that direct care workers and consumers throughout Pennsylvania can fully utilize available technology.

Expand the pool of potential workers, informal caregivers, and volunteers to assist those in need of services and supports with maintaining their independence. Implement incentives to encourage college students to enter the direct care workforce. Provide loan forgiveness, tuition assistance, academic credit, or a combination thereof for college students who commit to work as a direct care worker for a certain length of time. Provide housing stipends to students who are vetted and reside with an older adult or person with a disability in exchange for helping with activities of daily living, such as shopping, cleaning, home maintenance, etc.

ODP Publications Since Last RCPA News

- 19-050 Medication Administration Scheduled Outage Notification, Critical Date Extension, and Face to Face Class Dates, Summer 2019
- 19-051 Additional (2nd) 2019–2020 Fiscal Year (FY) Renewal Guidance
- 19-052 Health Risk Screening Tool Implementation
- 19-053 ODP and OMHSAS Relaunch the Positive Approaches Journal
- 19-055 Statewide Quality Assessment and Improvement (QA&I) Process Meeting for Adult Autism Waiver (AAW) Supports Coordination Organizations (SCO) and Providers
- 19-056 Incident Management (IM) Bulletin Available for Public Comment
- 19-057 Special Populations Unit’s Virtual Targeted Trainings Now Posted and Accessible on MyODP.org
- 19-059 Clarification of the Health Risk Screening Tool (HRST) Implementation for AAW and ACAP
- 19-060 Now Available Fair Hearing Request Form Translated Into Spanish
- 19-061 Final Fee Schedule Rates and Fiscal Year Renewal Guidance for Community Participation Supports
- ODP News May 2019
- ODP Health Alert – Measles Can Be Prevented
- Dual Diagnosis Professional Conference Series: Supporting Healthy Sexuality
- Save the Date Dual Diagnosis Conference – Expanding Capacity: Reaching Further
Pennsylvania’s Annual Child Protective Services Report Released

On May 1, the Pennsylvania Department of Human Services (DHS) released the 2018 Child Protective Services Annual Report. While the report indicated a decrease in the number of report investigations, the slight increase in statewide substantiated reports of child abuse underscores the impact of changes to Pennsylvania’s Child Protective Services Law as outlined in the executive summary below.

EXECUTIVE SUMMARY

- Statewide substantiated reports of child abuse increased from 1.8 per thousand children in 2017 to 1.9 per thousand children in 2018.
- Sexual abuse remains the leading category of abuse, followed by physical abuse.
- Parents continue to be the persons most responsible for abuse of their children.
- Amendments to the Child Protective Services Law, effective in December 2014, continue to drive increases in substantiated reports of child abuse. These amendments increased the number of mandated reporters of child abuse and added additional persons who could be identified as perpetrators of child abuse.

RCPA and its members continue our active partnership in statewide initiatives in keeping Pennsylvania’s children safe. Contact Jim Sharp, RCPA Children’s Division Director, with questions.

PRTF Inpatient Treatment Regulation Claims Its Own Chapter

Based upon stakeholder feedback, the Office of Mental Health and Substance Abuse Services (OMHSAS) has determined that the Psychiatric Residential Treatment Facilities (PRTF) portion of the inpatient regulations will be removed from the inpatient chapter and will have its own chapter to be managed by the Children’s Bureau. This move ensures a youth-centric effort in the development of regulations that focus on the specific needs of adolescents. The work group for the new PRTF regulation will resume in July.

RCPA and Relias Partnership

To increase value for our members, RCPA and Relias have entered into a business partnership that provides access to quality, cost-effective training and professional development opportunities. This contractual agreement benefits our members in several ways. The training we offer covers topics such as Behavioral Health, Opioids/Substance Use Disorders, and Older Adults/Aging Process. We have also included Applied Behavioral Analysis (ABA) courses, including the Registered Behavior Technician (RBT) Series, as well as our Board Certified Behavior Analyst (BCBA) CEU Membership and related trainings. Browse ReliasAcademy.com for additional offerings. Benefits include:

- Discounted pricing on Relias training and related products;
- Exclusive access to Relias training through a portal provided on the RCPA website homepage;
- Administrative cost savings;
- Minimize travel costs and time away from the office;
- Reach more people in a shorter amount of time;
- Experience a consistent, educational, training approach;
- Access to training topics/areas that help meet regulatory requirements;
- Improve the quality of service delivery;
- Attain required CE credits; and
- 24 hours a day, 7 days a week availability of educational courses.

Relias offers a user-friendly learning management system that removes barriers to learning, making it easy to save money, improve compliance, boost productivity, improve recruitment and staff retention, and improve the quality of care. Relias delivers online training that supports employees in mental health services, children’s services, addiction services, social services, and community health care. They also partner with top health and human services organizations, accrediting bodies, councils, and child welfare leagues to create unrivaled course content. For access to the RCPA Relias Online Training Portal, visit this link.
## JUNE

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Committee/Event</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tuesday, June 11</strong></td>
<td>12:00 pm – 1:00 pm</td>
<td>IPRC Advocacy, Education &amp; Membership Committee Conference Call</td>
</tr>
<tr>
<td><strong>Tuesday, June 11</strong></td>
<td>12:30 pm – 3:30 pm</td>
<td>Drug &amp; Alcohol Committee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Wednesday, June 12</strong></td>
<td>9:30 am – 12:00 pm</td>
<td>Mental Health Committee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Wednesday, June 12</strong></td>
<td>10:00 am – 2:00 pm</td>
<td>Brain Injury Committee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Wednesday, June 12</strong></td>
<td>1:00 pm – 4:00 pm</td>
<td>Criminal Justice Committee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Tuesday, June 18</strong></td>
<td>10:00 am – 12:30 pm</td>
<td>Med Rehab Committee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Tuesday, June 18</strong></td>
<td>12:15 pm – 1:00 pm</td>
<td>IPRC Outcomes &amp; Best Practices Committee Conference Call</td>
</tr>
<tr>
<td><strong>Tuesday, June 18</strong></td>
<td>2:00 pm – 3:00 pm</td>
<td>IPRC Webinar: Understanding the CDC Guideline for Treatment of Mild TBI Among Children</td>
</tr>
<tr>
<td><strong>Thursday, June 20</strong></td>
<td>9:00 am – 10:00 am</td>
<td>Government Affairs Committee Conference Call</td>
</tr>
</tbody>
</table>

## JULY

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Committee/Event</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tuesday, July 9</strong></td>
<td>12:00 pm – 1:00 pm</td>
<td>IPRC Advocacy, Education &amp; Membership Committee Conference Call</td>
</tr>
<tr>
<td><strong>Tuesday, July 16</strong></td>
<td>12:15 pm – 1:00 pm</td>
<td>IPRC Outcomes &amp; Best Practices Committee Conference Call</td>
</tr>
<tr>
<td><strong>Wednesday, July 17</strong></td>
<td>10:00 am – 2:00 pm</td>
<td>Children’s Steering Committee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Wednesday, July 17</strong></td>
<td>1:00 pm – 4:00 pm</td>
<td>Physical Disabilities &amp; Aging Division Penn Grant Centre</td>
</tr>
<tr>
<td><strong>Thursday, July 18</strong></td>
<td>9:00 am – 11:30 am</td>
<td>Employment Subcommittee Penn Grant Centre</td>
</tr>
<tr>
<td><strong>Thursday, July 18</strong></td>
<td>9:15 am – 11:30 am</td>
<td>SCO Subcommittee RCPA Conference Room</td>
</tr>
<tr>
<td><strong>Thursday, July 18</strong></td>
<td>12:00 pm – 3:00 pm</td>
<td>IDD Committee Penn Grant Centre</td>
</tr>
<tr>
<td><strong>Tuesday, July 30</strong></td>
<td>10:00 am – 3:00 pm</td>
<td>Compliance Training Penn Grant Centre</td>
</tr>
</tbody>
</table>