



CONFERENCE

2018 RCPA Annual Conference: Fueling the Future Was a Success

The 2018 RCPA Annual Conference is over. By all accounts, this year was a great success! While we are still going through all the written feedback, initial responses have been very complimentary. With nearly 750 attendees, there were a lot of positive comments on the level and range of presenters and on the general flow of events. Specific highlights noted were:



- ▶ The preconference panels on Mergers and Acquisitions, Value-Based Purchasing, and Medical Marijuana;
- ▶ The Secretary panel discussion among Teresa Miller (DHS), Teresa Osborne (Aging), Dr. Rachel Levine (Health), and Jen Smith (DDAP);
- ▶ The keynote and plenary speakers; and
- ▶ The general presence and informal interaction among agency leadership, administration officials, legislatures, and the BH-MCOs and CHC MCOs.

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©2018. 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

CareLink Celebrating 60 Years of Service

Human services professionals, business associates, higher education administrators, and representatives from legislator offices throughout the Delaware Valley attended a breakfast hosted by CareLink Community Support Services at The Inn at Swarthmore on October 19, 2018.



L to R – Carelink CEO Eileen Joseph and OMHSAS Deputy Secretary Lynn Kovich with RCPA Mental Health Division Director Sarah Eyster

The lively event, held to kick off CareLink's 60th anniversary, featured remarks from the agency's President & CEO Eileen Joseph, inspiring personal stories from participants in CareLink's education and employment

services, and insight from Pennsylvania Deputy Secretary for Mental Health & Substance Abuse Services Lynn Kovich.

Orphans Remembered a Century Later (features RCPA member Children's Service Center)

Why 4 Home Health Firms Made the Philadelphia 100 Fastest Growing Firms List. Hint: There's Lots of Demand (features RCPA Member My Independence at Home, LLC)

RCPA Congratulates Fran Malley, President/CEO of Berks Counseling Center, on her retirement!

Effective January 1, 2019, Fran will be stepping down as President/CEO; the Board of Directors of Berks Counseling Center (BCC) has selected Christine Axford as the next President/CEO. We wish Fran the best and look forward to working with Christine in her new position.



Visit the [RCPA website](#) for up-to-date information on legislation, meetings, trainings, and other industry developments. ◀

NEW MEMBERS

ASSOCIATE

BEHAVIORAL HEALTH ALLIANCE OF RURAL PENNSYLVANIA

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State College, PA 16803

Sally Walker, Executive Director

BUSINESS

INSIGHT TELEPSYCHIATRY

765 E Route 70 Bldg A

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PROVIDER

LIVENGRIN (SE REGION)

4833 Hulmeville Rd

Bensalem, PA 19020

Holly Livingston, Vice President Business Development

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 are financial incentives for the first two years of membership. If you have questions about membership or know of an organization that would benefit from membership with RCPA, please contact [Tieanna Lloyd](#), Accounts Receivable/ Membership Services Manager.

Annual Conference continued from front page

Of course, we are always looking for ways to improve on this success and make the experience that much more worthwhile. Specific areas I will be interested in include:

- ▶ Did people like the shorter, revised program format?
- ▶ Are there events that people did not feel were necessary? Events that should be added?
- ▶ Are there speakers we should definitely have back? Topics that should be added or expanded on?
- ▶ What did people think of the mobile app?
- ▶ Do attendees continue to like the Hershey venue?
- ▶ What was the experience of vendors and sponsors?

My goal is to have the RCPA conference be the primary event that you put on your calendar each year. To reach that goal we need to listen and continue to adapt – all ideas are welcome.

Next year we are again back in Hershey and the planning has already begun. Until then... stay involved! The success of RCPA in representing providers depends upon the membership staying active in our efforts. We are at the Capitol every day, continue to regularly meet with the administration, legislators, and the governor's office, and have active committee meetings — we look forward to seeing you there and involved. ◀



Representative Mike Schlossberg was there to speak to the crowd and sign copies of his novel, "Redemption," which he wrote to give those who suffer from mental illness, depression, and anxiety hope for the future.

Exhibit Hall's "Best in Show" Goes to Salisbury Behavioral Health, Inc.

Once again, Salisbury Behavioral Health accepted and won the challenge to work the 2018 theme, Fueling the Future, into their booth décor and giveaways. From the car and the phone charger to the Fuel Bars, they thought of everything! Congratulations to the Salisbury Behavioral Health team for their support and enthusiasm in exhibiting at the 2018 RCPA Conference, Fueling the Future. Salisbury will receive 20% off their 2019 exhibit booth. ◀

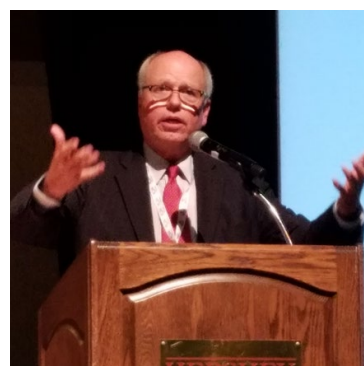


Congratulations to the award winners!



Conference Awards Summary

Administrative Leadership	Julie Barley	OMHSAS
Administrative Leadership	Sherry Peters	OMHSAS
Community Leadership	Mike Barnhart	QUEST
Community Leadership	Julius Boatright	Steel Smiling
Community Leadership	K. Irene Morgan	Partners in Progress and Community Life Options
Exemplary Service	Paul Stanalonis	Stanalonis & Associates, LLC
Innovation	Berks Counseling Center, Inc.	Frances Malley
Innovation	Children's Service Center of Wyoming Valley, Inc.	Mike Hopkins
Innovation	IDEATE (id8)	Kaelynne Koval
Legislative Leadership	Maureen Cronin	The Arc of Pennsylvania
Lifetime Achievement	Rocco Cambria	AHEDD
Lifetime Achievement	Mike Jarman	The Vista School
Lifetime Achievement	Dr. Ralph May	Community Guidance Center



Spike in Opioid Admission

The Pennsylvania Health Care Cost Containment Council (PHC4) released a research brief on hospitalizations related to opioid disorder. This brief is part of a series focused on opioid related hospitalizations. There were 36,522 opioid-related hospitalizations in 2016 and 36,712 in 2017. "These findings show a bigger picture of what we are facing with the opioid crisis and suggest how important it is to get immediate help to those addicted to opioids and to also identify lasting solutions to battle this problem," said Joe Martin, PHC4's Executive Director. The full brief is available [here](#). ◀

General Assembly Passes Medicaid Work Requirements Legislation

On its last voting day of the year, the Pennsylvania Legislature sent HB 2138 to the Governor, a bill to include work requirements for Medicaid beneficiaries.

If the legislation becomes law, it will require Medicaid recipients to work at least 20 hours a week or take part in 12 job training-related activities each week. Exempted from these requirements are:

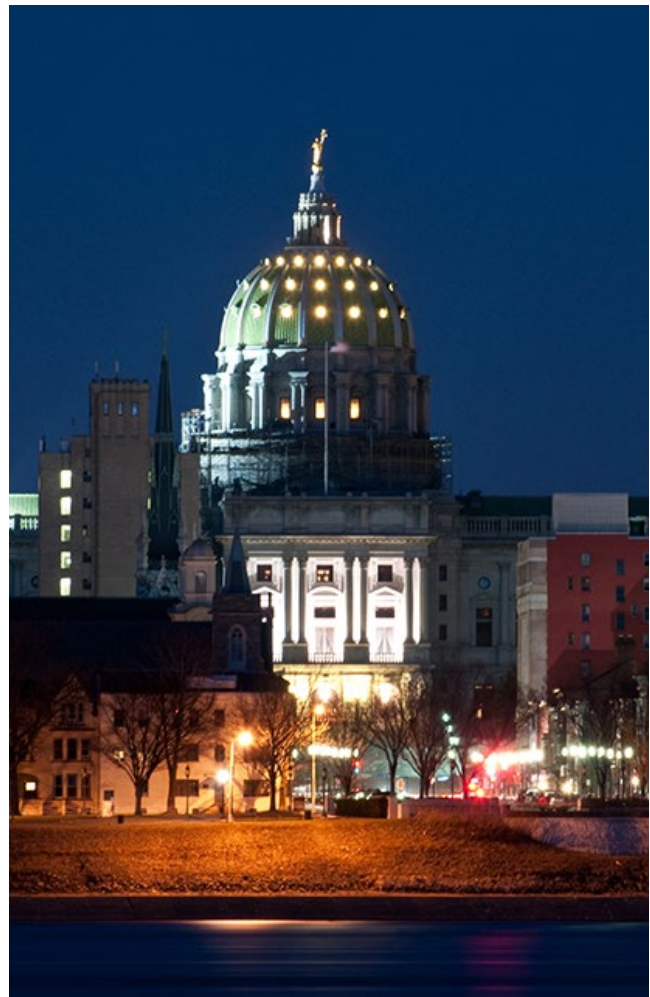
- ▶ An enrollee who is attending high-school full time;
- ▶ An individual who is receiving temporary or permanent long-term disability benefits;
- ▶ An individual who is under 19 years of age or 65 and older;
- ▶ An individual residing in a mental health institution or correctional institution;
- ▶ An individual experiencing a crisis, serious medical condition, or temporary condition which prohibits employment, including, but not limited to, domestic violence or a substance use disorder;
- ▶ Those who are a primary caregiver to a dependent under six years of age; and
- ▶ Those who are the primary caregiver for a person who is permanently disabled or in hospice.

RCPA advocated against the passage of any work requirement bills. Even though the General Assembly passed HB 2138, the Governor vetoed the legislation on Monday, October 22. ◀

SB 780 – Telemedicine Legislation

Over the past few weeks, RCPA has been working with various statewide health associations advocating for the passage of SB 780. SB 780 would have established the Telemedicine Act, which would have authorized health care providers to use telemedicine and require insurers to provide coverage and reimbursement for its use (a detailed summary of the bill can be found [here](#)).

Unfortunately, SB 780 failed to reach the Governor's desk by the last scheduled legislative session day. The main issue of why it did not get over the finish line was that an abortion amendment was offered and legislators were reluctant to have an abortion debate on the floor prior to the General Election. The plan is to reintroduce the bill when the new General Assembly convenes in January. ◀



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. ◀

RCPA Legislative Tracking Report on Hiatus

RCPA's legislative tracking report will be taking a much needed rest after a very busy and hectic legislative session. The tracking report will resume after the General Assembly reconvenes in January!! ◀

Suicide Prevention Passes General Assembly

This past week, the General Assembly passed HB 1822, which provides for suicide prevention programs in institutions of higher education. Under the bill, the term "institution of higher education" includes:

- ▶ A community college;
- ▶ A university within The State System of Higher Education;
- ▶ The Pennsylvania State University, The University of Pittsburgh, Temple University, Lincoln University, or any other institution designated as state-related by The Commonwealth;
- ▶ The Thaddeus Stevens College of Technology;
- ▶ A private school; and
- ▶ A foreign corporation approved to operate an educational enterprise.

An institution of higher education may develop and implement a plan to advise students and staff on mental health and suicide prevention programs available both on campus and off campus. The plan should include:

- ▶ Contact information for national, state, and local suicide prevention hotlines;
- ▶ Crisis intervention services;
- ▶ Mental health services and access;
- ▶ Outreach plans regarding, at a minimum, mental health services and suicide prevention; and
- ▶ Post-intervention plans.

If an institution of higher education adopts a plan, it must transmit a copy of the plan to the Department of Education by August 1 of each year. The department shall post that information on its publicly accessible internet website. If an institution submits a plan to the department which contains the minimum information, the department shall designate the institution of higher education as a certified suicide prevention institution. The Department of Education may adopt or create a logo for institutions of higher education that have been certified, which the institution may use and market. ◀

CMS to Strengthen Oversight of Medicare's Accreditation Organizations

On October 4, 2018, the Centers for Medicare and Medicaid Services (CMS) [announced](#) their plan to strengthen the oversight of Medicare's Accreditation agencies (such as the Joint Commission). CMS plans to increase transparency with performances and streamline and strengthen the validation of Accrediting Organization surveys. ◀

CMS Announces New Participants in Bundled Payments for Care Improvement Model

The Centers for Medicare and Medicaid Services (CMS) has announced the new participants in a new voluntary episode payment model, [Bundled Payments for Care Improvement \(BPCI\) Advanced Model](#) that will test a new iteration of bundled payments for 32 clinical episodes. The new participants started in the model on October 1, 2018 and will run through December 31, 2023. A second application period will open in January 2020. ◀

Proposed Changes to Medicare Claims Appeals Process

On October 2, 2018, the Centers for Medicare and Medicaid Services (CMS) issued a [proposed rule](#) that would make changes to the Medicare appeals regulations governing how providers and beneficiaries can appeal denied claims. A few of the proposed changes include removing the requirement that a beneficiary appellant sign appeals and clarifying certain regulations that have caused confusion over the years. The proposed rule also includes revisions to ensure the regulations are clearly arranged and written to give stakeholders a better understanding of the appeals process. Comments on this proposed rule are due by December 3, 2018, at 5:00 pm. ◀



OLTL Offers Training for Service Coordinators

The Office of Long-Term Living (OLTL) announced that they will be offering classroom trainings for Service Coordinators (SCs). As a prerequisite to these classroom trainings, attendees must have completed the three OLTL Online SC Modules available [online](#), which provide a strong foundation on the basics needed to fulfill SC requirements. The one-day, instructor-led classroom sessions will allow participants to take what they learned from the online modules and apply it to situations found every day on the job. 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.

Please Note: The training is required for SCs working with waiver participants enrolled in the Aging, Attendant Care, Independence, and OBRA waivers, as well as the Act 150 program. OLTL will hold three, one-day, instructor-led sessions, which will run from 8:00 am to 4:30 pm each day, as follows:

SC training – Friday, November 9, 2018, in Harrisburg
Pennsylvania Training and Technical Assistance Network (PaTTAN)
Room: Lebanon
6340 Flank Drive
Harrisburg, PA 17112

SC training – Tuesday, December 4, 2018, in Bethlehem
Best Western Lehigh Valley Hotel & Conference Center
Room: Salon B
300 Gateway Drive
Bethlehem, PA 18017

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. If you have questions about the training, please contact OLTL's Bureau of Participant Operations at 717-787-8091. ◀



MLTSS Subcommittee to Convene on November 7

The next Managed Long-Term Services and Supports (MLTSS) Subcommittee meeting will be held on Wednesday, November 7, 2018 in the Honor's Suite at 333 Market Street Tower in Harrisburg, from 10:00 am to 1:00 pm. ◀

Four New Quality Measures Now Displayed on IRF Compare

The Centers for Medicare and Medicaid Services (CMS) has updated the quality data publicly reported on [IRF Compare](#) as a result of their quarterly refresh on the site. In addition to the inpatient rehabilitation facility (IRF) quality reporting program (QRP) measures that are currently displayed on IRF Compare, the four new quality measures are now displayed. These measures include:

- ▶ Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631)
- ▶ Application of Percent of Residents Experiencing One or More Falls with Major Injury (NQF #0674)
- ▶ Medicare Spending Per Beneficiary–PAC IRF QRP
- ▶ Discharge to Community–PAC IRF QRP ◀

CMS Proposed Rule Focuses on Efficiency, Transparency, and Burden Reduction

The Centers for Medicare and Medicaid Services (CMS) released a [proposed rule](#) that would reform Medicare regulations identified as unnecessary, obsolete, or excessively burdensome on health care providers and suppliers. It would also increase the ability of health care professionals to devote resources to improving patient care by eliminating or reducing requirements that impede quality patient care or that divert resources away from furnishing high quality patient care. This would include proposed changes to the Conditions of Participation and other regulations for providers, including hospitals. Additionally, the rule would potentially reduce the frequency of utilization reviews for Comprehensive Outpatient Rehabilitation Facilities (CORFs) from quarterly to annually. Comments on this proposed rule are due by November 19, 2018. ◀

OIG Report Focuses on IRF Compliance With Medicare Coverage & Documentation Requirements

The Office of Inspector General for the Department of Health and Human Services (HHS) released a report, [Many Inpatient Rehabilitation Facility Stays Did Not Meet Medicare Coverage and Documentation Requirements](#), that has raised concern that many inpatient rehabilitation facilities (IRFs) have not complied with Medicare coverage and documentation requirements and that Medicare paid them for care to beneficiaries that was not reasonable and necessary. According to the report, some of the errors identified by the OIG included: many IRFs did not have adequate internal controls to prevent inappropriate admissions; Medicare Part A fee-for-service (FFS) lacked a prepayment review for IRF admissions; and administrative law judge (ALJ) hearings for IRF appeals did not always involve CMS participation to ensure that Medicare coverage and documentation requirements were accurately interpreted. As a result of their findings, the OIG made the following recommendations to CMS:

- ▶ Educate IRF clinical and billing personnel on Medicare coverage and documentation requirements and work with providers to develop best practices to improve internal controls;
- ▶ Increase oversight activities for IRFs, such as post-payment medical review;
- ▶ Work with the Office of Medicare Hearings and Appeals (OMHA) to ensure that Medicare coverage and documentation requirements for IRF care are fairly represented at ALJ hearings; and
- ▶ Reevaluate the IRF payment system, which could include a demonstration project requiring preauthorization for Medicare Part A FFS IRF stays modeled on Medicare Advantage practices. ◀

Drop in Ivy League Football Concussions Following Five Yard Change During Kickoffs

An article in [Kaiser Health News](#) focuses on how the eight school Ivy League enacted a change, pushing the kickoff up 5 yards, after studies showed that 21 percent of concussions occurred during the play that leads to high speed crashes. The league also changed its touchback rule to help reduce the concussion rate. As a result, the NCAA and other football leagues are considering a similar adjustment. The kickoff has often been described as the game's most dangerous play. ◀

BIAA Announces Upcoming Webinars

The Brain Injury Association of America (BIAA) has [posted](#) their upcoming live webinars, including *Managing Stress as a TBI Caregiver*; *Concussion as a Craniocervical Injury*; and *Neuroendocrine Function after Brain Injury*. ◀



Physical Disabilities & Aging

Articles and topics selected for this newsletter are designed to help build continued knowledge base among our members for the topics that will impact you most as we move to managed care in Pennsylvania.

The Potential to Reduce Falls and Avert Costs by Clinically Managing Fall Risk

This study published in the *American Journal of Preventative Medicine* reviews literature on fall risk factors and prevention strategies. It uses peer-reviewed research from between 1994 and 2017 to estimate the number of medically treated falls that could be prevented and the direct medical costs that could be averted. The estimates were created by looking specifically at evidence-based fall interventions in clinical settings. The interventions with the potential to help the greatest number of older adults were those that provided home modification delivered by an occupational therapist (38.2 million), and recommended daily vitamin D supplements (16.7 million). The full study can be found [here](#). ◀



Home Safety Checklist for Alzheimer's Disease

This room-by-room checklist highlights potential hazards in your home and suggests changes to help keep a person with Alzheimer's disease safe. Examples include covering unused electrical outlets with childproof plugs, placing light switches at the top and the bottom of stairs, and keeping all medications (prescription and over-the-counter) locked. The National Institute on Aging (NIA) suggests re-evaluating home safety periodically as behavior and abilities change. The full report can be found [here](#). ◀

Policy Spotlight on Integrated Care in Medicare Advantage

The National Association of Area Agencies on Aging (n4a) Aging and Disability Business Institute recently updated its Medicare Advantage Policy Brief. This brief summarizes how recent changes to Medicare Advantage may enable AAAs and other CBOs to form new partnerships with Medicare Advantage plans. These partnerships can be used to provide supplemental benefits, such as home-delivered meals and transportation, to beneficiaries. The newly updated brief covers additional guidance from CMS on the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act and the release of final policy guidance that makes significant changes to Medicare Advantage plans. The full report can be found [here](#). ◀

Cost of Living Increases for 2019 Announced

The Social Security Act provides for annual cost-of-living adjustment (COLA) increases based on inflation. The Social Security Administration (SSA) has measured the increase in the Consumer Price Index (CPI-W) from the third quarter of 2017 through the third quarter of 2018, and announced a 2.8 percent COLA for Social Security and Supplemental Security Income (SSI) benefits in 2019. In practice, the SSA estimates that this will mean the average monthly Social Security benefit for a retired worker will increase by \$39, from \$1,422 in 2018 to \$1,461 in 2019. Likewise, the average monthly benefit for a Social Security disabled worker beneficiary will increase by \$34, from \$1,222 in 2018 to \$1,234 in 2019. The report can be found [here](#). ◀



Outpatient Psychiatric Regulations Miss the October Independent Regulatory Review Commission (IRRC) Meeting

The outpatient regulations are back under legal review to ensure that they are aligned with the recent legislation that was passed (Act 25 of 2018). As a result, the regulations will likely not pass this year; the regulation has to go to the IRRC before being implemented. Additionally, RCPA members learned through the IRRC presentation that once a regulation is approved/promulgated, it cannot be changed for three years. OMHSAS legal is checking on that statement. ◀

Collaborative Documentation Back on the Table

Prior to Sherry Peters' retirement, Sherry revisited the collaborative documentation bulletin that was never sent as final. This remains on the OMHSAS agenda. ◀

RCPA Meets With the State Mental Health Caucus

On October 16, RCPA staff met with members of the Mental Health Caucus. We were invited by Caucus lead Rep. Mike Schlossberg and 2019 priorities for mental health were discussed. Those priorities include:

- ▶ Workforce development, recruitment, and retention;
- ▶ Regulatory reform;
- ▶ Value-Based Purchasing and Alternative Payment Models;
- ▶ Expansion of the use of technology; and
- ▶ HealthChoices Behavioral Health Carve-Out.

In addition to those priorities, discussion also included parity and mental health care in the corrections system. The Caucus members challenged RCPA to provide language for the 2019 session, combining all priorities, to help drive policy through regulatory updates or through legislation. ◀



New State Program to Help Individuals Battling Opioid Use Disorder Find and Maintain Housing in Pennsylvania

Governor Tom Wolf today announced a new state program that aims to direct \$15 million for an opioid housing initiative that will fund a minimum of eight pilot projects in eligible urban and rural communities throughout the commonwealth. The proposed pilot programs must help individuals to become and remain engaged in evidence-based treatment interventions, provide individuals with the necessary support services to maintain housing stability, and provide pre-tenancy and tenancy education services. The full article can be read [here](#) (Source: Governor Wolf official website). ◀

D&A/SUD Survey – XYZ Packet

The RCPA Drug and Alcohol Division sent out a survey which involved the use of the new XYZ packet. The survey results indicated that most respondents have finalized the rate-setting process and RCPA is pleased to report that the majority of members reported that the Single County Authority agreed to accept the rate determined by the XYZ packet. The survey also included questions about how the rate received compared to the rate received by the BH-MCO. The majority reported that the rate from the BH-MCO was lower. RCPA continues to advocate that all payors consider the costs to provide the services when determining rates. Please contact [Lynn Cooper](#), RCPA Drug & Alcohol Division Director, with questions. ◀



Emerging Roles for Peer Providers in Mental Health and Substance Use Disorders

This is an [excellent study](#) focusing on peer providers. The purpose of this study was to identify and assess states with best practices in peer provider workforce development and employment. A growing body of research demonstrates that peer providers with lived experience contribute positively to the treatment and recovery of individuals with behavioral health needs. Increased employment opportunities have led to policy concerns about training, certification, roles, and reimbursement for peer provider services. A case study approach included a national panel of subject matter experts who suggested best practice states. Researchers conducted three to five-day site visits in four states: Arizona, Georgia, Texas, and Pennsylvania. Data collection included document review and interviews with state policymakers, directors of training and certification bodies, peer providers, and other staff in mental health and substance use treatment and recovery organizations. Data collection and analysis were performed in 2015. Contact RCPA Drug & Alcohol Division Director [Lynn Cooper](#) with questions. ◀

SAMHSA Releases Treatment Episode Data Set (TEDS): 2016 Admissions to and Discharges From Publicly Funded Substance Use Treatment

This [report](#) presents national- and state-level data from the Treatment Episode Data Set (TEDS) for admissions and discharges occurring in 2016, and trend data from 2006 to 2016. It summarizes demographic information and the characteristics and outcomes of treatment for alcohol and/or drug use among clients aged 12 years and older in facilities that report to individual state administrative data systems. Data include treatment admissions and discharges that were received and processed through March 16, 2018. ◀

Mental Health and Criminal Justice Interventions Will Lower Health Care Costs in the United States

Individuals living with serious mental illness (SMI) or substance use disorders (SUD) are overrepresented in the criminal justice system, typically for non-violent crimes or low-level offenses, suggesting that lack of access to treatment for SMI/SUD is a factor in incarceration risk. Upon release, many individuals lose access to behavioral health services, which increases the likelihood of a re-arrest. The criminal justice system has become the largest de facto mental health and addiction treatment provider in the United States due to an underfunded and overburdened safety net, but prisons and jails are often poorly equipped to address SMI or SUD, leading to increased costs for states and counties. Community-based treatment lowers the chances of reincarceration, decreases the burden on jails and prisons to provide mental health services, and improves outcomes for these individuals by providing evidence-based treatment that can help them avoid arrest due to their condition. ◀

D&A Survey: Confidentiality and Zoning

Confidentiality: RCPA has organized a task force to take another look at the 255.5 confidentiality regulations in PA to help us identify specific challenges members have faced over the years. Our primary goal is to place the consent where it should be — only with the clients themselves. The results of the survey provide a large amount of information that will be shared with the task force members as they move forward to develop recommendations for much needed changes.

Zoning: We are also in need of information regarding zoning issues. The Department of Drug and Alcohol Programs (DDAP) is interested in hearing about the experiences drug and alcohol treatment providers have with their local zoning authorities. DDAP was seeking information to gauge the size and scope of the issue, as well as to identify if and where zoning is particularly difficult. The results of the survey indicated that most members had not had zoning problems. Those that did report issues indicated that they usually came up when trying to open group homes and methadone facilities. The other concerns related to how long it took to get through the various zoning/certificates of occupancy. The biggest concern reported was working with DDAP to have expedited licenses and these issues caused delays. Please contact [Lynn Cooper](#), RCPA Drug & Alcohol Division Director, with any questions. ◀



Promising Policies And Practices to Address Tobacco Use by Persons With Mental and Substance Use Disorders

A new Centers for Disease Control and Prevention (CDC) resource providing examples of promising policies and practices from several states that are addressing tobacco use by persons with mental and substance use disorders is now available. In recent years, states have made significant progress in addressing tobacco use and secondhand smoke exposure in behavioral health treatment settings. This document could serve as a resource for tobacco control and behavioral health programs as they prioritize potential actions to address tobacco use among the populations that they serve. The information can be viewed and downloaded from this [web page](#). ◀

Warm Handoff Guidelines

Since January 2016, the Department of Drug and Alcohol Programs (DDAP) has worked with stakeholders to ensure a seamless transition for opioid overdose survivors from emergency medical care to specialty substance use disorder (SUD) treatment, thus improving the prospect of recovery. This concept is referred to as a warm handoff. DDAP incorporated contractual changes with the Single County Authorities (SCAs) in its 2015–2020 grant agreement that establishes the overdose survivor as a priority population and requires each SCA to create a warm handoff policy.

Guidelines and Protocols

In February 2017 (and updated in February 2018), DDAP, along with the Department of Health and the Pennsylvania College of Emergency Physicians, released guidelines and protocols for warm handoffs:

- ▶ [Letter of Explanation](#) (PDF)
- ▶ [Warm Hand-Off Flow Chart](#) (PDF)
- ▶ [SCA Contact Information](#) (PDF)
- ▶ [Road to Recovery Poster](#) (PDF)
- ▶ [Steps in Recovery Poster](#) (PDF)

(Source: DDAP website)

National Disability Employment Policy, From the New Deal to the Real Deal

Joining the Industries of the Future

In 2012, the National Council on Disability (NCD) issued a report discussing Section 14(c) of the Fair Labor Standards Act. Section 14(c) allows employers who have received a certificate from the Department of Labor (DOL) Wage and Hour Division (WHD) to pay wages less than the Federal minimum wage to workers who have disabilities. In the 2012 report, NCD called for “the phase out of Section 14(c) employment nationally and the phase up of supported employment services offered in competitive integrated employment.”

Six years later, NCD has issued a follow-up report assessing the status of Section 14(c) employment. In the 2018 report, NCD explores trends regarding American workers with disabilities being paid below minimum wage and highlights recent policy changes impacting this employment model. In this report, NCD makes observations on the need to build capacity and infrastructure for supported employment services. NCD also issues several recommendations for how to change pay structures and how to make improvements to the processes of employment service providers who support people with disabilities. The full report can be found [here](#). ◀

IRRC Approves Regulatory Change for ODP Regulations for HCBS and Licensing

On October 18, 2018, the Independent Regulatory Review Commission (IRRC) public meeting agenda included the consideration of ODP's proposed Chapter 6100 and accompanying changes to Chapters 2380, 2390, 6400, and 6500. The revisions made to the four licensing chapters align requirements to provide continuity across all programs, eliminate conflict for providers, and reduce DHS oversight complexity and costs. Areas that are now compatible include individual planning, individual rights, staff training, incident management, medication administration, and restrictive procedures. Chapter 6100 replaces Chapter 51, which previously regulated program and fiscal rules for services provided in facilities and in the home, and Chapter 6200 Room and Board Regulations.

Chapter 6100 was developed over a four-year period of time, with much input from stakeholders including a work group made up of 45 individuals, families, advocates, universities, county programs, and providers that met 15 days over the four years. A smaller fiscal work group also met several times in 2015. Much public comment was received, and major changes were made from proposed rulemaking to the final regulations as a result.

The public meeting included testimony from 15 speakers including RCPA

President/CEO Richard Edley, RCPA member Will Stennett (Wesley Family Services), other state association representatives, self-advocates, family members, advocacy organizations, and county representatives. There was controversy regarding the implementation of these regulations due to the regulation requiring a rate "refresh" every three years. Expenses for providers continue to increase each year, and DSP wages are real issues that will not be addressed if rates do not keep current with needs. This concern was shared by the IRRC Commissioners who recommended that continued efforts be directed to improving DSP wages and keeping reimbursement to providers current with actual costs for providing services. Reimbursement rates have a direct impact on the quality of services provided which is of concern to all.

There were also differing opinions regarding Incident Management (specifically the reporting of ER visits), incidents to be investigated by Certified Investigators employed by agencies, amount of training required for employees, and involvement of family members in the lives of individuals being served.

Kristin Ahrens, Acting Deputy Secretary for ODP, committed to forming a subcommittee of the Information Sharing and Advisory

Committee (ISAC) that will meet on a quarterly basis to review Incident Management and QA&I data/trends as an oversight for the service system. After careful consideration of written comments that were submitted, testimony that was heard, and review of the regulatory package, the commissioners unanimously approved implementation of the regulations.

Now that the IRRC has approved the regulation, the next step is for the package to be sent to the Attorney General for approval and then to the Legislative Reference Bureau for publication in the Pennsylvania Bulletin. It is anticipated that publication will occur on **December 29, 2018**.

Anticipated effective dates will be as follows:

- ▶ Date of Publication (target date is December 29, 2018) – Reserved Capacity, Claims, Progress Notes, Payment, Enforcement, AWC, OHCDs, Vendors
- ▶ March 17, 2019 – Size of Service Location
- ▶ 120 Days following publication (target date is April 29, 2019) – Licensing and Remaining Sections of Chapter 6100

Any questions, contact [Carol Ferenz](#), RCPA IDD Division Director. ◀

Self-Driving Cars for Individuals With Disabilities

Transportation is one of the biggest challenges for individuals with disabilities to live independently in the community. Self-driving cars provide opportunities to increase individuals' ability to participate in their communities. The House of Representatives passed its SELF-DRIVE Act in the fall of 2017. Since then, its sister bill, the AV START Act, has been stagnant in the US Senate. This Act has specific provisions addressing the needs of people with disabilities. Specifically, the AV START Act prevents licensing practices that would exclude persons with disabilities from being able to use an automated vehicle (AV). The bill also creates a working group dedicated to accessibility for individuals with disabilities. American Network of Community Options and Resources (ANCOR) CEO Barbara Merrill has an [op-ed](#) in *The Hill*, in which she advocates for passage of the AV START Act. ◀

Social Security and Supplemental Security Income (SSI) Benefits to Increase 2.8% in 2019

Many of the individuals served by members of RCPA receive SS/SSI benefits. Individuals who live in community group homes pay rent based on 72% of their income. The Social Security Administration announced that a 2.8 percent cost-of-living adjustment (COLA) will begin with benefits payable to Social Security beneficiaries in January 2019. Increased payments to SSI beneficiaries will begin on December 31, 2018. (Note: some people receive both Social Security and SSI benefits). The Social Security Act ties the annual COLA to the increase in the Consumer Price Index as determined by the Department of Labor's Bureau of Labor Statistics.

Social Security and SSI beneficiaries are normally notified by mail in early December about their new benefit amount. This year, for the first time, most people who receive Social Security payments will be able to view their COLA notice online through their my Social Security account. People may create or access their my Social Security account [online](#). Information about Medicare changes for 2019, when announced, will be available on the official [Medicare website](#). ◀

ODP Publications since last RCPA News

- ▶ 079-18 College of Employment Services Webinar: (ACRE) Basic Employment Certification Overview
- ▶ 080-18 Now Available: Quality Assessment and Improvement (QA&I) Annual Statewide Report for Cycle 1 Year 1 Fiscal Year 2017-2018
- ▶ 081-18 Public Comment Opportunity: Guidance for the Development of Human Rights Teams and Human Rights Committees
- ▶ 082-18 College of Employment Services ACRE Update – 500 Additional Seats Available
- ▶ 9/10/18 Addendum to Informational Packet 031-15 Updated Attachment #4 Mandatory Reporting requirements
- ▶ ODP Bulletin 00-18-06 Variance Form and Process: Requesting a Variance in the Consolidated, Community Living, and Person/Family Directed Support Waivers
- ▶ Attachment #1 – Waiver Variance Form
- ▶ Attachment #2 – Instructions for Waiver Variance Form
- ▶ 083-18 Housing Transition and Tenancy Sustaining Services
- ▶ 084-18 Revised Qualification Process for New Providers
- ▶ 085-18 Now Available: Amendments to the Consolidated, Community Living, and P/FDS Waivers Approved by CMS
- ▶ 086-18 HCSIS Release 10.0 Newsletter Now Available
- ▶ 087-18 ODP Announces KEPRO's New SIS Scheduling Portal
- ▶ 088-18 Home and Community Based Services Provider Settings Self-Assessment Update 2
- ▶ 089-18 New Course Available: Dual Diagnosis Training
- ▶ 090-18 College of Employment Services ACRE Update Unlimited Seats Available
- ▶ 091-18 Additional Waiver Amendment Webinar Available
- ▶ 092-18 Clarification on Declining a Communication Assessment Report – only released to a specific audience; IDD providers of service did not receive this
- ▶ 093-18 Claim and Service Documentation Requirements Webcast and Webinars
- ▶ Health Alert – 2018-2019 Flu Season Alert
- ▶ 094-18 Certified Investigator Forum November Date Now Available
- ▶ 095-18 Now Available: Version 2 of the Community Participation Supports Question and Answer Document
- ▶ Version #2 Community Participation Support Q&A ◀

RCPA Children's Steering Committee Welcomes New Members

The Children's Steering Committee is celebrating the addition of eight new members. The new members will help to expand our capacity for advocating on behalf of the entire Children's Division. Here is the full list of committee members (*new members):

- ▶ Garrett Trout (Co-chair), TrueNorth Wellness
- ▶ Susan Hurd (Co-chair), Children's Behavioral Health Services, Inc.
- ▶ Carolanne Jones, Children's Service Center
- ▶ *Charlotte Rerko, The Achievement Center
- ▶ Cindi Hobbes (RCPA Staff), International Pediatric Rehab Collaborative
- ▶ Cindi Mazza, Salisbury Behavioral Health
- ▶ Colleen McNichol, Child Guidance Resource Center
- ▶ Frank Janakovic, Alternative Community Resource Programs
- ▶ Kevin Bennett, COMHAR Inc.
- ▶ Kip Hoffman, Community Counseling Center of Mercer County
- ▶ *Mark DeRubeis, Appalachian IU 8
- ▶ *Tammy Marsico, UPMC
- ▶ *Melanie Beidler, Devereux Advanced Behavioral Health
- ▶ *Nancy Murray, Achieva
- ▶ *Nancy Dinatale, Lenape Valley Foundation
- ▶ Rayni Brindley, Devereux Advanced Behavioral Health
- ▶ Tammy Relken, Pressley Ridge
- ▶ Rochelle Von Hof, The Barber Institute
- ▶ *Shannon Tronzo, UPMC
- ▶ Mark Wendel, CenClear
- ▶ *Kirsten Yurich, The Vista School

The committee meets at least six times per year to discuss and identify priorities and establish goals and action plans. The co-chairs provide leadership, guidance, and valuable recommendations for advancing policy, regulatory, and legislative priorities. ◀



Pennsylvania's Early Learning Council

RCPA Children's Division Director Robena Spangler was sworn in and commissioned by the Governor as a member of the PA Early Learning Council. The purpose of the Pennsylvania Early Learning Council is to plan for the expansion of effective early learning and development services for young children and their families, and make recommendations to ensure the plans are implemented successfully. The Council will be responsible for coordinating the delivery of these Federal and Commonwealth programs designed to serve young children from birth through their entry into school, and to ensure a smooth transition for those children into K-12 education and other programs serving older children. ◀

Rate Methodology Task Force Kickoff

The Office of Children, Youth, and Families staff and Deputy Secretary Cathy Utz hosted a kickoff meeting of the Rate Methodology Task Force on October 15. RCPA Children's Division members are represented on the task force by Robena Spangler. A majority of the day was devoted to making necessary amendments to the charter that defines the purpose and goals of the task force as it relates to recommendations for rate setting between providers and counties. The members also discussed recommendations implemented since 2014, recommendations not yet implemented, recommendations that address concerns raised by the Administration for Children and Families (ACF) regarding allowability, and recommendations that address reimbursement for actual and reasonable costs. The task force is scheduled to meet six times during FFY 2019-2020. Additional messaging and formal meeting summaries will be generated by the Department and shared as they are made available. Any questions, please contact [Robena Spangler](#). ◀

Since 1975, the Institute for Human Resources and Services, Inc. (IHRS) has promoted the psychological, social, and educational well-being of children and adults through our individualized residential programs, and our full-range of foster care and adoption services. IHRS, located in Kingston PA, is currently accepting applications for the position of Chief Executive Officer (CEO). The CEO shall provide day-to-day leadership that reflects our corporate Mission and Vision, while ensuring that IHRS is positioned to implement effective growth strategies and processes, and achieve financial strength and operating efficiencies.



The candidate must have a Bachelor's or Master's degree (preferred) and 6 to 8 years of senior level management experience. Experience in human services or health care is preferred. The position offers a competitive salary with excellent benefits. This position will report to the Board of Directors.

Please submit resume to [Paul B. Stanalonis](mailto:pstanalonis@hotmail.com), C.E.O., Stanalonis & Associates, LLC at pstanalonis@hotmail.com, or to 5537 General Knipe Drive, Mechanicsburg PA 17050 by November 30, 2018.

EOE

IHRS is an affirmative action, equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, ancestry, age, sexual orientation, protected veteran status, disability or any other legally protected status.

Chief Operating Officer

Barber National Institute, operating programs across the Commonwealth of Pennsylvania and headquartered in Erie, PA is accepting applications for the position of Chief Operating Officer (COO). The COO will be responsible for the daily operation of the Institute which has over \$100 million annual revenue, and will plan and direct major aspects of the operational policies, objectives, and strategic initiatives. The COO will guide corporate vision and strategy while establishing operational direction and focus. The candidate must have the skill sets to execute multiple high impact initiatives to achieve overall corporate goals.



Barber National Institute
Making dreams come true.

The candidate must have a Master's degree with 5 to 10 years of high level management experience. Experience in human services or health care is preferred. The position offers a competitive 6 figure salary with excellent benefits. This position will report to Chief Executive Officer.

Please submit resume to [Kathleen Fling](#), Vice President Human Resources, or to 100 Barber Place, Erie, PA 16507 by November 16, 2018.

EOE

If you need an accommodation to apply, please contact HR.

We are an affirmative action federal contractor equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, ancestry, age, sexual orientation, protected veteran status, disability or any other legally protected status.



Events subject to change; members will be notified of any developments

NOVEMBER

Wednesday, November 7	10:00 am – 3:00 pm	Human Resources Committee <i>Penn Grant Centre</i>
Thursday, November 8	12:00 pm – 1:00 pm	Outpatient Rehabilitation Committee <i>Webcast Only</i>
Tuesday, November 13	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee <i>Conference Call</i>
Thursday, November 15	10:00 am – 3:00 pm	Children's Division <i>Penn Grant Centre</i>
Tuesday, November 20	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee <i>Conference Call</i>
Wednesday, November 28	10:00 am – 2:00 pm	Children's Steering Committee <i>Penn Grant Centre</i>
Thursday, November 29	10:00 am – 2:00 pm	Early Intervention Committee <i>Penn Grant Centre</i>
Thursday, November 29	12:00 pm – 1:00 pm	IPRC Special Broadcast: Advancing Children's Health Care: A US Legislative Update

DECEMBER

Tuesday, December 4	12:30 pm – 3:30 pm	Drug & Alcohol Committee <i>Penn Grant Centre</i>
Wednesday, December 5	9:30 am – 12:00 pm	Mental Health Committee <i>Penn Grant Centre</i>
	10:00 am – 2:00 pm	Brain Injury Committee <i>Penn Grant Centre</i>
	1:00 pm – 4:00 pm	Criminal Justice Committee <i>RCPA Conference Room</i>
Tuesday, December 11	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee <i>Conference Call</i>
Wednesday, December 12	10:00 am – 12:00 pm	Open Board Meeting <i>Penn Grant Centre</i>

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Events subject to change; members will be notified of any developments

DECEMBER (continued)

Thursday, December 13	9:15 am – 11:15 am	Supports Coordination Organization Subcommittee <i>RCPA Conference Room</i>
	12:15 pm – 4:15 pm	Intellectual/Developmental Disabilities Committee <i>Penn Grant Centre</i>
Thursday, December 13	12:00 pm – 1:00 pm EST	IPRC Webinar: Problem Solving Respiratory Issues in Children with Neuromuscular Disease
Tuesday, December 18	10:00 am – 12:30 pm	Medical Rehabilitation Committee <i>RCPA Conference Room</i>
Tuesday, December 18	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee <i>Conference Call</i>
Wednesday, December 19	1:00 pm – 3:30 pm	Physical Disabilities and Aging Division <i>Penn Grant Centre</i>
Thursday, December 20	11:00 am – 3:00 pm	BH-MCO/RCPA Task Force Meeting <i>Penn Grant Centre</i>