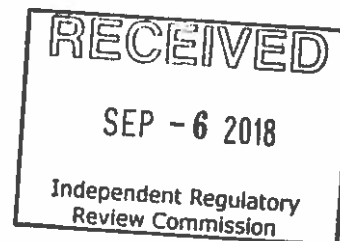


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Champa, Heidi

From: Baran, Ryan <rbaran@stepbystepusa.com>
Sent: Tuesday, September 04, 2018 4:22 PM
To: PW, IBHS
Subject: Comments on IBHS
Attachments: IBHS Comments-SBS-9.4.18.pdf



Ms. Pride,

Our comments on the proposed IBHS regulations are attached.

Thank you for the opportunity to comment.

-Ryan

Ryan Baran
Service Director
Children's Behavioral Health Services
Step By Step, Inc.
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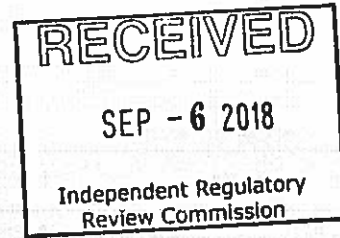


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September 4, 2018

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Tara Pride
Bureau of Policy, Planning, and Program Development
Commonwealth Towers
11th Floor
P.O. Box 2675
303 Walnut Street
Harrisburg PA 17105

Dear Ms. Pride,

My name is Ryan Baran, and I am the Service Director for the Children's Behavioral Health Department of Step By Step, Inc. We are based in Wilkes-Barre and provide Behavioral Health Rehabilitation Services (BHRS) to children in eight counties in the state. Additionally, we also operate an exception program, The Specialized Autism Support Program (SASP). This program currently operates in 8 early intervention classrooms and 19 primary and elementary-aged classrooms in 2 counties.

This letter represents my agency's comments on the proposed regulations for Intensive Behavioral Health Services.

5240.5 Service description

We were under the impression that the process for approving service descriptions would be much simpler for providers. Based on the information provided in the proposed regulations, this does not appear to be the case. Is there a way for this to become a more streamlined process that is easier for providers to complete?

5240.12 and 5240.81 Staff qualifications

It does not appear that a licensed behavior specialist would qualify to serve as the clinical director. We would request that this licensure be added to the list of other qualified licenses in regulation b-2.

If we were to have one of our staff begin the process of obtaining their BCBA certification, and the staff is unable to pass the exam, where does that leave the agency? While trying to find another staff or an existing BCBA to serve as the clinical director, what would happen to the current caseload? Could the agency continue to provide services while they search for a new BCBA?

5240.13 Staff training plan

We have concerns regarding the need for each staff to follow his/her annual date. Can this be changed to the standard calendar year for all staff? Managing each staff's individual annual date will add costs to the agency.

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5240.72 and 5240.82 Supervision

While we acknowledge the value of supervision, we do feel that the regulations listed contain an excessive amount of supervision. One suggestion we would offer is to have the direct observation of services be completed once every six months, instead of every three months as currently indicated.

5240.73 and 5240.83 Staff training requirements

What is the process for having trainings approved by the department? Our staff also develop new trainings on an as-needed basis. Will each training need department approval prior to being presented to staff?

1155.33 Payment conditions for ABA

This section and the sections related to assessments are unclear, specifically the process of how this all works. If the written order recommends 30 hours of TSS per week, and then the staff doing the assessment believes that the child only needs 10 hours of TSS per week, which is correct? What is the agency expected to follow?

Overall, our biggest concerns are with the required use of ABA and the certifications that accompany its use. To be clear, we are an agency that provides ABA services. We currently have a caseload that is comprised almost exclusively of children with autism spectrum disorders. We train all our staff in the principles of ABA and we utilize BCBAs in consulting roles.

However, we do not believe that ABA should be the only treatment option for children. There are many other treatment modalities that can benefit children with autism and other intellectual and developmental disabilities and we do not believe the state should force providers to limit their focus.

While we acknowledge that having a BCBA serve as the program's clinical director is a move we support, we do not believe that each and every BSC or BSA also needs to have a BCBA or be on track to have a BCBA. At present, we are experiencing significant challenges in staffing our programs. The proposed regulations will further limit the pool of potential candidates for these positions. And as a result of that, fewer children will receive the services they need.

I appreciate your review of these comments.

Sincerely,

Ryan Baran, MSW
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