

**Madison Brame**

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**From:** Jackie Kreshock <JackieK@pccyfs.org>  
**Sent:** Friday, August 29, 2025 11:11 AM  
**To:** IRRC  
**Subject:** Comment for Regulation #14-555: Psychiatric Residential Treatment Facilities  
**Attachments:** PRTF proposed regulation cost analysis.xlsx

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Hello,

I am contacting the IRRC to have the attachment included on the proposed PRTF public comment section. I understand that the comment period is closed and there may not be a response to this correspondence but would like it published for the public to have knowledge of the contents. See below for the information needed per comment instructions:

Regulation #14-555: Psychiatric Residential Treatment Facilities

IRRC Number: 3417

Agency Name: DHS

Regulation Status: Proposed

PA Code: [55 Pa. Code Chapter 1330](#)

[55 Pa. Code Chapter 5330](#)

[55 Pa. Code Chapter 3800](#)

Thank you for your time. Please feel free to contact me using the information below if there are any questions or concerns.

*Jackie*

**Jaclyn Kreshock**

*Director, Children's Behavioral Health Services*

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**Proposed PRTF regulation cost comparison (staffing, upgrades, etc.)**

DESCRIPTION	OMHSAS ESTIMATE	PROVIDER ACTUAL COST	NUMBER OF POSITIONS/OTHER NOTES	DIFFERENCE	TOTAL GAP
<b>Medical Director</b>	\$ 289,300	\$ 289,300	1 FT Position	\$ -	\$ 33,836
		\$ 268,523	1 FT Position	\$ 20,777	
		\$ 115,541	Will result in additional 42 hours at \$402/hour	\$ 173,759	
		\$ 450,000	Contracted Part-Time Psychiatrist	\$ (160,700)	
<b>Mental Health Professional</b>	\$ 51,500	\$ 725,550	10 Positions - current salary 72,555	\$ (674,050)	\$ (838,074)
		\$ 100,000	2 Positions - current salary 50,000	\$ (48,500)	
		\$ 167,024	2 Additional - current salary 83,512	\$ (115,524)	
<b>Mental Health Supervisor</b>	\$ 35,700	\$ 2,012,580	36 Positions (1 for every 12 clients) - current salary 55,905	\$ (1,976,880)	\$ (1,976,880)
<b>Mental Health Worker</b>	\$ 35,700	\$ 879,210	18 Positions - current salary 48,845	\$ (843,510)	\$ (967,343)
		\$ 159,533	1 additional per shift per building - 4 total - current salary 39,883	\$ (123,833)	
<b>Registered Nurse</b>	N/A	\$ 149,398	2 positions - current salary 74,699	\$ (149,398)	\$ (149,398)
<b>D/C coordination and outreach</b>	N/A	\$ 46,685	3 positions - cost per position 15,562	\$ (46,685)	\$ (46,685)
<b>Delayed egress doors</b>	N/A	\$ 2,000		\$ (2,000)	\$ (2,000)
<b>Non-allowable costs (transportation, clinical testing not provided by PRTF, clothing, hygiene products, healthcare not funded by insurance, living costs associated with onsite visits from parents/guardians/caregivers)</b>	N/A				\$ (75,000)
		\$ 64,000		\$ (64,000)	
		\$ 11,000		\$ (11,000)	

**Provider comments:**

- 17% increase from current operating budget
- At the projected current budget and projected deficit of over \$400,000, the proposed current regulations increase that deficit to over \$1,000,000.
- The current funded rate for psychiatrist residential treatment program is significantly below the cost of running the program. The current average rate would need to be increased by approximately 4.7%. the current average rate would need to be increased by 12.22% to meet the requirements of the new regulations.

**Notes:** As seen above, the OMHSAS estimate and actual salary/pay does not align, posing a major cost increase to providers depending on the number of staff they will need to be able to come into compliance. Further, the additional burden of non-allowable costs will make running a quality PRTF program virtually impossible in a climate where recruitment and retention is even more challenging. PRTF has and will continue to be a much-needed level of care for select individuals and hiring qualified workers is an integral aspect of offering youth the high-quality care that they deserve.

*§ 1330.39. Annual cost reporting and independent audit* of the proposed regulations, states that PRTFs shall submit a projected cost report within three months of publication of final form rule making. However, this preliminary cost comparison shows that the financial impact of these changes are significant. Waiting until three months after the proposed regulations have gone into effect will not offer providers with the requisite funding increases to implement these regulations. Rather, PCCYFS proposes that the projected cost report be conducted **prior** to the final rule so that PRTF providers are able to secure the adequate funding to implement these changes on day one.