



December 27, 2024

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*Via Electronic Email to:*

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**Re: Regulation #14-555 (IRRC Number 3417): Psychiatric Residential Treatment Facilities**

Dear Members of the Independent Regulatory Review Commission:

We have reviewed the proposed regulation noted above which will codify the minimum licensing and treatment standards, Medical Assistance (MA) participation requirements and MA payment conditions for the Psychiatric Residential Treatment Facilities (PRTF) that serve children, youth and young adults with a behavioral health diagnosis.

The proposed regulation is a significant undertaking, as evidenced by the number of comments received during the public comment period. In 2020, prior to the publication of the proposed regulation, the Pennsylvania Department of Human Services (DHS) established a stakeholder workgroup. DHS further notes that they consulted with the Mental Health Planning Council and family advocates as well as other medical professionals during the development process. DHS also states that interested parties and organizations were provided with updates to ensure transparency.

Although DHS has outlined their outreach efforts, we would encourage DHS to reconvene the stakeholders to obtain a clear understanding of the current challenges facing residential treatment facilities. Specifically, a number of commentators have highlighted the current workforce shortages and have expressed concerns that the increased staffing requirements in the proposed regulation may be very difficult to achieve. Additional information is needed to ascertain whether or not providers will be able to comply. If they cannot do so, there will not be adequate facilities to provide these important services, and the regulations will be rendered meaningless.

In terms of projected cost, DHS notes that there is insufficient information to determine the fiscal impact the proposed rulemaking would have on each individual residential treatment facility. DHS further anticipates that the behavioral health managed care organizations' capitation rates and MA provider rates will be adjusted to reflect the increased PRTF costs. The facilities may also incur costs pertaining to additional paperwork requirements, accreditation, staffing requirements, training, and obtaining an automated external defibrillator. Commentators expressed their concern about the lack of certainty about the availability of funding and the ability to effectuate the changes required by the proposed regulation. Although we applaud DHS' efforts to ensure that our citizens receive quality care, it is unclear whether such funding will be available for this purpose (especially given fiscal projections from the Independent Fiscal Office). Moreover, DHS' submitted documentation lacks clarity regarding whether the increased administrative and training expectations will lead to improved client care. Any additional financial burden on facilities to meet these requirements should be justified by evidence that they enhance the quality and delivery of these services.

There are a number of specific issues raised by commentators that note practical concerns related to transportation, the reporting of incidents, as well as a lack of clarity in certain definitions. We would encourage DHS to carefully review these comments and assess whether these issues can be addressed to ensure that the proper balance is achieved so that facilities can operate in an efficient manner that will provide a safe environment for those receiving services.

Given the significance of these regulations and the public comments received, we will continue to review the information and may submit additional comments at a later date. Thank you for the opportunity to provide comments on Regulation 14-555 (IRRC #3417).

Sincerely,



Rep. Doyle Heffley  
122<sup>nd</sup> Legislative District



Rep. Perry Warren  
31st Legislative District