

# Welcome to the Webinar!

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*We will begin the presentation shortly.  
Thank you for your patience.*

Attendees can access the presentation slides now at:  
[MCTAC.org/page/events](https://mctac.org/page/events)

A recording of the event will be made available at the same event page in the next few days.

# Family Peer Support and Youth Peer Support & Training

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NEW YORK CHILDREN'S STATE PLAN  
AMENDMENT (SPA) SERVICE-BY-SERVICE  
OVERVIEW SERIES

# Presented by:

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# Housekeeping & Logistics

- WebEx Chat Functionality for Q&A
- Slides are posted at [MCTAC.org](http://MCTAC.org) and a recording will be available soon (usually less than one week)
- Questions not addressed today will be reviewed and incorporated into future training and resources
- Reminder: Information and timelines are current as of the date of the presentation. Content presented is summary and discussion of the draft SPA manual currently available on-line. Please refer to the manual for further detail, definitions, references, and other useful information.

# Goals for Today

- ▶ **Review key information from SPA Manual**
- ▶ **Add context and clarity whenever possible**
- ▶ **Generate and answer questions**
- ▶ **Help inform service providers' decision-making process about obtaining SPA designation**
  - The designation process will be finalized and announced soon. A presentation and opportunity for designation-specific questions will also be offered.

# Agenda

- ▶ **Children's System Transformation & SPA Refresher and Update**
- ▶ **Family Peer Support and Youth Peer Support & Training Walkthrough**
- ▶ **Upcoming training and available resources**
- ▶ **Q&A**

# Overview and Refresher of Children's State Plan Amendment (SPA)

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THE MANAGED CARE TECHNICAL  
ASSISTANCE CENTER OF NEW YORK

# What's Ahead for New York State's Children's System

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- ▶ **Children's Health Homes: Statewide 10/1/16**
- ▶ **New State Plan Services: Statewide 1/1/2017**
- ▶ **Behavioral Health & SPA Services Transition to Managed Care (including children in the care of Voluntary Foster Care Agencies)**
  - NYC/LI/Westchester: 7/1/2017 and Rest-of-State: 1/1/2018
- ▶ **Children's Home and Community Based Services Transition to Managed Care**
  - NYC/LI/Westchester: 7/1/2017 and Rest-of-State: 1/1/2018

# Children's Medicaid State Plan Amendment - Update

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- Draft SPA Provider Manual was released on March 9, 2016
- Six New Services (require CMS approval):
  - Crisis Intervention
  - Other Licensed Practitioner
  - Community Psychiatric Supports and Treatment (CPST)
  - Psychosocial Rehabilitation (PSR)
  - Family Peer Support Services
  - Youth Peer Support and Training Services
- SPA Designation/Application – in final revision stage
- Draft SPA rates will be made public

# State Plan Amendment Goals

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The main goals of the additional services in New York's State Medicaid Plan are to:

- ▶ Identify needs early on in a child's life;
- ▶ Maintain the child at home with support and services;
- ▶ Maintain the child in the community;
- ▶ Prevent the need for long-term and/or more expensive services; and
- ▶ Increase the delivery of services following trauma-informed care principles.

# SPA Provider Manual Organization

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- Definition of Service Components
- Allowable Service Modality
- Allowable Setting
- Admissions/Discharge Criteria (i.e., medical necessity)
- Limitations/Exclusions
- Agency/Supervisor/Practitioner Qualifications
- Training Requirements and Recommendations
- Recommended Staffing Ratio/Caseload Size

**Manual available at [MCTAC.org](https://mctac.org) under Resources or on the Children's Managed Care website (see last slide)**

# Key Points

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## Proposed Medicaid State Plan Services will:

- ▶ Be available to all Medicaid eligible children under the age of 21 who meet medical necessity criteria (currently being refined).
- ▶ Be delivered in a culturally competent manner and be trauma-informed.
- ▶ Allow interventions to be delivered in natural community-based settings where children and their families live and bolster lower intensity services to prevent the need for more restrictive settings and higher intensity services.
- ▶ Fall under the Early Periodic Screening, Diagnosis and Treatment benefits (known commonly as EPSDT).

# Key Points (continued)

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- ▶ The new benefits are stand alone services, not programs.
- ▶ Services provided to children and youth must include communication and coordination with the family, caregiver and/or legal guardian. Coordination with other child-serving systems should occur to achieve the treatment goals.
- ▶ When SPA services are launched, they will initially be billed under Medicaid fee-for-service until transitioned to Medicaid Managed Care.
- ▶ Once designated for SPA services, providers can begin the contracting process with Medicaid Managed Care Plans (starting January 2017). Further training on contracting is planned.

# Medical Necessity

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- ▶ **Medical necessity includes any treatment that:**
  - Corrects or ameliorates chronic conditions found through an EPSDT screening OR
  - Addresses the prevention, diagnosis, and treatment of health impairments; the ability to achieve age-appropriate growth and development; and the ability to attain, maintain, or regain functional capacity.
- ▶ **Each state plan service will have criteria for:**
  - ✓ admission
  - ✓ continued stay
  - ✓ discharge

# Family Peer Support Services and Youth Peer Support & Training

- ▶ Array of formal and informal services and supports provided by peers - individuals with lived experience
- ▶ Family Peer Support Services designed to support parents/caregivers for the benefit of youth
- ▶ Youth Peer Support and Training intended for child/youth

# Defining Family

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- ▶ Family is a unit of people residing together, with significant attachment to the child/youth
- ▶ Includes both adults and children, with adults taking on parenthood/caregiving for the children, even if the individual is living outside of the home
- ▶ Family is broadly defined, and can include families created through:
  - Birth
  - Foster Care
  - Adoption
  - Self-created unit

# Family Peer Support Services

OVERVIEW

STAFF QUALIFICATIONS/CERTIFICATIONS

SUPERVISOR QUALIFICATIONS

# About Family Peer Support

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- ▶ **Services provided by a Family Peer Advocate to families caring for/raising a child who is experiencing challenges in home, school, placement, or community:**
  - Social
  - Emotional
  - Substance use
  - Behavioral challenges

# Family Peer Support Services

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- ▶ Engagement, bridging and transition support
- ▶ Self-advocacy, self-efficacy, and empowerment
- ▶ Parent skill development
- ▶ Community connections and natural supports

# Engagement, Bridging, and Transition Support

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- Based on the strengths and needs of the youth and family, connect them with appropriate services and supports.
- Serve as a bridge between families and service providers, supporting a productive and respectful partnership by assisting the families to express their strengths, needs and goals.
- Address any concrete or subjective barriers that may prevent full participation in services.
- Support and assist families during stages of transition which may be unfamiliar (e.g. placements, in crisis, and between service systems ).

# Self-Advocacy, Self-Efficacy, and Empowerment

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- Assist families to advocate on behalf of themselves and their child to promote shared decision making
- Empower families to express their fears, expectations and anxieties to promote positive shared decision making
- ▶ Assist families to frame questions to ask providers

# Parent Skill Development

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- ▶ Support families in their role as their child's advocate by modeling and coaching
- ▶ Helps the family learn and practice strategies to support their child's positive behavior.
- ▶ Assist the family to implement strategies recommended by clinicians
- ▶ Provide individual or group parent skill development related to the behavioral and medical health needs of the child (i.e., training on special needs parenting skills).

# Community Connections and Natural Supports

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- ▶ Enhance the quality of life by integration and supports for families in their own communities
- ▶ Help the family to rediscover and reconnect to natural supports already present in their lives.
- ▶ Utilize the families' knowledge of their community in developing new supportive relationships.
- ▶ Help the family identify and become involved in leisure and recreational activities in their community.

# FPSS Staff Qualifications

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Qualified staff include:

- ▶ NYS credentialed Family Peer Advocate (FPA).
- ▶ NYS Provisional FPA Credential
  - Provisional FPA must complete all other requirements of the credential within 24 months of employment as a FPA.

OR

- Certified Recovery Peer Advocate with a Family Specialty

# OMH Provisional Family Peer Advocate

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- ▶ FPA may obtain a provisional credential that enables provided services to be billed if the applicant has:
  - Lived experience
  - High school diploma or equivalent credential (can be waived by NYS if person has demonstrated competencies and has relevant life experience)
  - Completed Level One of the Parent Empowerment Program (PEP) training or approved comparable training.
  - Two letters of reference attesting to proficiency in and suitability for the role of a Family Peer Advocate (FPA).
  - Agree to practice according to the Family Peer Advocate Code of Ethics

***Provisional certificate is valid for 18 months while completing Level 2 training and acquiring 1000 hours of providing FPSS.***

# OMH Family Peer Advocate Credential

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- ▶ **To be eligible for the FPA Credential, the individual must have:**
  - ‘Lived experience’ as a parent or primary caregiver who has navigated child serving systems on behalf of their child(ren) with social, emotional, developmental, health and/or behavioral healthcare needs.
  - Have a high school diploma or equivalent (can be waived by NYS if person has demonstrated competencies and has relevant life experience)
  - Level One and Level Two of the Family Peer Advocate Core Training/ Parent Empowerment training (or approved comparable training)
  - Three letters of reference attesting to proficiency in and suitability for the role of a FPA (including one from a FPA supervisor).
  - 1000 hours of providing FPSS
- ▶ **20 hours of continuing education required every 2 years to maintain/renew FPA credential**

# OASAS Certified Recovery Peer Advocate with a Family Specialty

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- 18 years of age
- Lived experience as a family member impacted by youth substance use disorders.
- High school diploma or a equivalency degree
- 46 training hours (advocacy, mentoring/education, recovery/wellness support and ethical responsibility)
- 1,000 hours of documented related work experience, (500 hours of related work experience if they: have a BA/BS, CASAC or CASAC-T, or completed the 30-Hour Recovery Coach Academy training )
- 25 hours of supervision
- Passing score on Peer Advocate Exam (or other exam by an OASAS designated certifying body)
- Two letters of recommendation
- 16 hours in the area of Family Specialty
- 20 hours of continuing education earned every two years

# Supervisor Qualifications

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- ▶ One hour supervision for every 40 hours of Family Peer Support (option to have a separate administrative supervisor)
- ▶ FPA supervisor for OMH FPA:
  - ▶ An FPA with a minimum 4 years providing Family Peer Support (including at least 1 year as credentialed FPA); OR
  - ▶ Mental health professional with training in Family Peer Support and role of FPAs and the FPSS Program moves to transition to supervision by experienced FPAs

# Supervisor Qualifications (cont.)

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CRPA-F supervisor for OASAS:

- A Certified Alcohol and Substance Abuse Counselor (CASAC) working within an OASAS certified program;  
AND
- must be provided by an organization documented and qualified to provide supervision

# Examples

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- ▶ A family member is experiencing difficulties raising their child who is struggling behaviorally at home. The family receives FPSS weekly, in the home, to practice strategies to support their child's positive behavior.
- ▶ A grandmother has custody of her grandson that has behavioral concerns. FPSS is meeting weekly with the grandmother to assist her with implementing parenting strategies recommended by her grandson's doctor and assist her in facilitating meetings with providers to ensure shared decision-making.

# Examples (continued)

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- ▶ A family is concerned about their daughter's eating disorder. A treatment plan goal is for the daughter to remain safely within the home. The mom is struggling with finding available resources for her daughter.

The Family Peer Advocate (FPA) meets with the mom to explore available community resources, services, and supports and works with the mom to explore the family's needs and preferences, helping to empower her to make informed choices. The FPA assists the family to facilitate appointments with potential service providers.

# Juan

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- ▶ Juan, age 15, is about to be discharged from a residential program. Family Peer Support Services has been working with Juan's parents for the past two months to help them stay actively involved with Juan while he is in placement, obtain the support they need during home visits, and prepare for a smooth transition home.
- ▶ FPSS will assist Juan's Family in:
  - understanding and implementing the safety plan put in place by Juan, his parents and Juan's service provider;
  - making connections to recreational activities in the community that are a priority for Juan; and
  - working with Juan's school to ensure that needed academic and behavioral supports are in place.

# Connor and Haley

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Connor and Haley (twins, age 7) were born prematurely. Both children have serious asthma. Their mother, Lauren, is raising the children alone without any relatives nearby. She has missed numerous days of work and is worried about losing her job. The school keeps calling about her son's behavior. Lauren has always been able to handle everything, but she confides in a colleague that things are starting to unravel. Her colleague suggests that she call a Family Peer Support Program.

The FPA helps Lauren work with the school district to start the process of obtaining an evaluation for Connor and they arrange an appointment at the clinic as well. The FPA helps Lauren contact a free legal services clinic so she can work to obtain child support which might allow her to cut back on her hours at work. They are also working on some strategies to support Connor's behavior at home. Over time, Lauren shared with the FPA that she was struggling with depression herself. The FPA is helping Lauren take steps to take care of herself.

# Youth Peer Support & Training

OVERVIEW

STAFF QUALIFICATIONS/CERTIFICATIONS

SUPERVISOR QUALIFICATIONS

# Youth Peer Support & Training

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- ▶ Services provided by a Credentialed Youth Peer Advocate – someone with “lived experience”
  - Training and support to promote engagement and active participation of the youth in the treatment planning
  - Reinforcement of skills learned through treatment
- ▶ Services include:
  - Skill building
  - Coaching
  - Self-advocacy, self-efficacy & empowerment
  - Community connections and natural supports

# Skill Building

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- ▶ YPST is delivered by a credential YPA to assist a youth in developing:
  - skills for coping with and managing psychiatric symptoms, trauma, and substance use disorders
  - skills for wellness, resiliency and recovery support
  - skills to independently navigate the service system
  - goal-setting skills
  - community living skills

# Coaching

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- ▶ YPAs coach youth:
  - by promoting wellness through modeling
  - by providing mutual support
  - partnering with a youth as they transition to different levels of care and into adulthood

# Self-Advocacy, Self-Efficacy, & Empowerment

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- ▶ Help youth develop self-advocacy skills and navigate service systems
- ▶ Assist youth with gaining and regaining the ability to make independent choices and assist youth in playing a proactive role in their own treatment
- ▶ Facilitate use of formal and informal services, including connection to peer support groups
- ▶ Serve as an advocate, mentor, or facilitator for resolution of issues

# Community Connections and Natural Supports

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- ▶ Help youth develop a network for information and support from others who have been through similar experiences
- ▶ Facilitate or arrange youth peer resiliency/recovery support groups

# Staff Qualifications:

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- ▶ Qualified staff include:
  - Youth Peer Advocate (YPA).
  - Provisional YPA
  - Certified Recovery Peer Advocate – Youth

# Youth Peer Advocate (YPA)

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- ▶ To be eligible for the YPA Credential, the individual must:
  - Be 18 – 30 years old
  - Self-identify as a consumer recipient of behavioral health services, special education services, or foster care
  - High school diploma or equivalent credential. (This requirement can be waived by NYS if the person has demonstrated competencies and has relevant life experience)
  - Level One online components; Level Two in-person training, and a minimum of three consultation calls
  - Three letters of reference attesting to proficiency in and suitability for the role of a Youth Peer Advocate, including one from a YPA supervisor

# YPA Credentialing

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- 600 hours of experience providing Youth Peer Support within 18 months
- 20 hours of continuing education every 2 years
- Knowledge of advocacy
- Familiarity with group development and/or facilitation of peer-to-peer groups or activities
- Able to use own lived experience with a mental illness, juvenile justice, special education, substance use disorder, and/or foster care to assist in other youth in their resiliency/recovery and wellness

# Youth Peer Advocate *Provisional* Credential

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- Same as Youth Peer Advocate credential, with the exception of the following:
  - Completes Level One of the required training
  - Submits two letters of reference attesting to proficiency in and suitability for the role of a YPA
  - Document 600 hours of experience providing Youth Peer Support services

# State Approved YPA Training

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- ▶ YPAs must complete State-approved trainings (both on-line and in-person):
  - Role of YPA in the managed care system
  - Peer mentoring and support
  - Small group facilitation skills
  - Professional expectations
  - Self-care and support
  - Level One and Level Two of the YPA Core Training (or approved comparable training)

# Certified Recovery Peer Advocate with a Youth Specialty

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- 18 – 30 years of age
- Lived experience as a family member impacted by youth substance use disorders.
- High school diploma or a equivalency degree
- 46 training hours (advocacy, mentoring/education, recovery/wellness support and ethical responsibility)
- 1,000 hours of documented related work experience, (500 hours of related work experience if they: have a BA/BS, CASAC or CASAC-T, or completed the 30-Hour Recovery Coach Academy training )
- 25 hours of supervision
- Pass scoring on Peer Advocate Exam (or other exam by an OASAS designated certifying body)
- Two letters of recommendation
- 16 hours in the area of Youth Peer Support
- 20 hours of continuing education earned every two years

# Supervisor qualifications

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- ▶ YPAs can be supervised by:
  - Individuals who have a minimum of 4 years providing FPSS or YPST services, at least 1 year of which is as a credentialed FPA or YPA with access to clinical consultation as needed OR
  - A mental health professional with a) training in YPAT and the role of YPAs b) with access to discipline specific clinical consultation on a planned, regular basis.

# Example of YPST

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Johnny is a high school junior who has an upcoming Committee on Special Education (CSE) meeting. Johnny invited his Youth Peer Advocate (YPA) to support him.

The YPA may attend the CSE meeting with the parent and Johnny to support and assist him in verbalizing his goals and practice self-advocacy skills that they have been working on.

# Example of YPST

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- ▶ Stella is struggling with anxiety disorder. She was referred to a Youth Peer Advocate by her therapist to assist her in recognizing triggers.
- ▶ They worked together to develop coping skills so Stella could start to get involved in her school's basketball team.

# Similar Guidelines for FPSS and YPST

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- ▶ While services and provider/supervisor qualifications differ, there are many similar aspects of Family Peer Support Services and Youth Peer Support & Training within:
  - Modality of services
  - Settings
  - Admission and discharge requirements
  - Provider agency qualifications
  - Recommended training
  - Staff ratios
  - Billing codes

# Allowable Service Modalities

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- ▶ All interventions must be face-to-face
  - Individual
  - FPSS groups: composed of two or more families and cannot exceed more than six families -- no more than 12 individuals in total.
  - Youth groups: composed of two or more families cannot exceed 12 individuals total.
- ▶ Components not directed exclusively toward the benefit of the Medicaid eligible child/youth are not eligible for Medicaid reimbursement.

# Settings and caseload size

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- ▶ **Settings:** services can occur in a variety of settings including community locations where the child/youth/family lives, works, attends school, engages in services (e.g. provider office sites), and/or socializes.
- ▶ **Caseload size:** based on the needs of the child/youth and families with an emphasis on successful outcomes, individual satisfaction, and meeting the needs identified in the individual treatment plan.

# Admissions

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- ▶ The activities implemented should be identified and/or developed by a licensed practitioner of the Healing Arts (LPHA).
- ▶ The service is intended to allow the youth the best opportunity to remain in the community
- ▶ This service is directed at developing skills or achieving specific outcome(s)
- ▶ The amount, duration and scope of the service aligns with the unique needs of the youth/family.

# Discharge

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- ▶ Achievement of goals or other outcomes
- ▶ The youth and/or family has shown progress in their ability to expand their skills and learn strategies to meet goals.
- ▶ The youth/family has been involved in the discharge process.

# Reevaluation or plan review

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- ▶ Reevaluation should involve the individual, family and providers
- ▶ Determine whether services have contributed to meeting the stated goals.
- ▶ If not measurable reduction of disability or improvement in functioning, new intervention plan should be developed
  - New plan should identify different rehabilitation strategy with revised goals and services

# Provider Agency Qualifications

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- ▶ Any child serving agency or agency with children's behavioral health and health experience that is licensed, certified, or approved or designated by DOH, OASAS, OCFS, or OMH to provide comparable and appropriate services
- ▶ Must comply with additional requirements including:
  - Adhere to Medicaid requirements
  - Ensure staff receive training on Mandated Reporting,
  - Practitioners maintain licensure/credentialing necessary to provide services
  - Follow safety precautions needed to protect child population
  - Adhere to cultural competency guidelines
  - Be knowledgeable about trauma-informed care

# Service Specific Training Recommendations

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- ▶ In addition to the training required for certification/credentialing providers are also recommended to have training in:
  - Domestic Violence: Signs and Intervention
  - Motivational Interviewing
  - Personal Safety in the Community
- ▶ **Training Resources**
  - <http://www.nyscadv.org/training-and-technical-assistance/>
  - [http://www.ncdsv.org/ncd\\_upcomingtrainings.html#Ongoing](http://www.ncdsv.org/ncd_upcomingtrainings.html#Ongoing)
  - <http://www.opdv.ny.gov/>

# To Be Finalized and Announced

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- ▶ **Provider designation criteria and process**
- ▶ **SPA service documentation requirements**
- ▶ **Utilization Management process**
- ▶ **Family Peer Support Services and Youth Peer Support & Training specific:**
  - Billing methodology and coding structure
  - Language further defining medical necessity criteria
  - Additional limitations

*Once finalized, these will be incorporated into the SPA Provider Manual and shared widely.*

# Training and Resources

# SPA Training Series Schedule

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- ▶ *Thursday, 6/30 -- Other Licensed Practitioners*
- ▶ *Thursday, 7/7 -- Psychosocial Rehabilitation Services*
- ▶ *Thursday, 7/14-- Family Peer Support Services & Youth Peer Support and Training*
- ▶ **Thursday, 7/21 -- Community Psychiatric Supports and Treatment**
- ▶ **Thursday, 7/28 -- Crisis Intervention**

## **State-led training on the Child and Adolescent Needs and Strengths (CANS-NY):**

- ▶ *Albany on June 22<sup>nd</sup> and 23<sup>rd</sup>*
- ▶ *NYC on July 12<sup>th</sup> and 13<sup>th</sup> and again on August 29<sup>th</sup> and 30<sup>th</sup>*
- ▶ *Rochester on August 18<sup>th</sup> and 19<sup>th</sup>*

# SPA Training Plan

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- **June/July** – High-level service-by-service overview, designation process, billing rules when available
- **September** – Rates/billing codes, staffing requirements, caseloads, eligibility/medical necessity, EHR help (in-person)
- **October** – Referral process, documentation, continuing education, co-enrollment rules, exclusions, health home interaction, reporting requirements (web-based)
- **November/December** – Detailed training for each service (full-day statewide in-person and web-based supplements)
- **January 1, 2017** – Children’s SPA services go live! Ongoing support and training responsive to areas of provider need supporting implementation

# Resources and Information

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Family Peer Advocate Credentialing: Families Together [www.ftnys.org](http://www.ftnys.org)

Please specify if kids system/managed care specific in subject line:

**NYS OMH Managed Care  
Mailbox**

[OMH-Managed-  
Care@omh.ny.gov](mailto:OMH-Managed-Care@omh.ny.gov)

**NYSDOH Health Homes for  
Children:**

[HHSC@health.ny.gov](mailto:HHSC@health.ny.gov)

**NYS OASAS Mailbox:**

[PICM@oasas.ny.gov](mailto:PICM@oasas.ny.gov)

**NYS OCFS Mailbox:**

[OCFS-Managed-  
Care@ocfs.ny.gov](mailto:OCFS-Managed-Care@ocfs.ny.gov)

Children's Managed Care Design:

[http://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health\\_reform.htm](http://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health_reform.htm)

# Questions and Discussion

Please send questions to:  
[mctac.info@nyu.edu](mailto:mctac.info@nyu.edu)

Logistical questions usually receive a response in 1 business day or less.

Longer & more complicated questions can take longer.

**We appreciate your interest and patience!**

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ASK MCTAC

WHAT WE DO PROVIDER READINESS TOOLS AND RESOURCES LEARNING COMMUNITIES EVENTS NEWS

### Upcoming Events

Friday, March 18, 2016  
3-Part Contracting Series for Rest-of-State Adult Behavioral Health Providers: February-March 2016

Thursday, March 31, 2016  
Small Business Regional Kickoff Events: February 19 - March 31, Statewide

Thursday, April 14, 2016  
Utilization Management (UM) and Billing Series for Rest of State (ROS) and Long Island (LI) Adult Behavioral Health Providers

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