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Our Mission

CCAP advocates as the unifying voice of all Pennsylvania counties and provides leadership and support for excellence in county government.

Our Vision

CCAP is the recognized leader for Pennsylvania county government.

Founded in 1886, CCAP is an affiliate of the National Association of Counties (NACo).

To acquire an article idea submittal form for CCAP's *Pennsylvania County News* please email John Buffone at jbuffone@pacounties.org.

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PENNSYLVANIA county news

VOLUME 1 2025



Every January, county leaders from across the state come together at the Capitol to announce their legislative priorities for the year. These priorities are selected by CCAP members as the issues with the greatest significance and most potential impact to counties in the coming year. In 2025, counties have three legislative priorities spanning 911 services, mental health funding and elections. In this edition of county news, we will dig deep into these issues to show how they impact our everyday lives.

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features



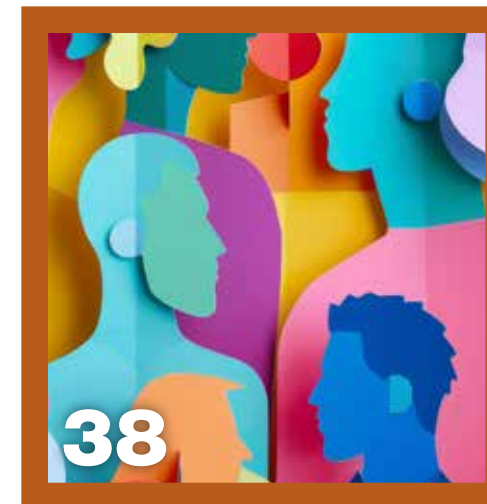
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SHERENE HESS
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My shelves are crammed with books of all manner of topics from history to leadership to biographies to social sciences and cultural studies and everything in between. I've enjoyed reading them, and confess that sometimes I buy a book, never intending to read it, rather, simply to possess it. I rarely part with my books, finding each one of them unique. But there is one special item occupying the shelf that I open more than any other: my 1977 Traveler Stamp Album for Stamps of the World.

Purchased at the mall hobby store, this sturdy compilation of pages describing the countries of the world spoke to me as a nascent teenager; turning every page was an adventure. I poured over the words and pictures on each page and sifted eagerly through the piles of old stamps given to me or purchased through various means.

At the time, my uncle worked for the CIA; while living in the Philippines, he would send me fascinating stamps from there. I

would mention my interest in philately to my elderly relatives and they would retrieve from their attics stacks of old letters, through which I would flip, searching for that rarity, which I never did find. It didn't matter. It was the journey I loved, fascinated by the miniature great works of art, the nods to poets and presidents and flora and fauna, and so much more. Stamp collecting gave this poor kid from a tiny town in central PA a splendid glimpse into the world and its people.

I'm convinced that my keen interest in collecting stamps informed my awareness about public service at a young age. Through my collecting, I learned about governmental leaders and their cultures, institutions and innovation, community building and the responsibility to be aware of something other than one's own self.

I eventually put away my stamp collection but the notion of understanding the connection of community and cultures helped

propel me to a calling that involved serving the public through working together with a commitment to the public good. I started my first term as county commissioner after a career mostly with public agencies and am grateful to be in my tenth year serving the citizens of Indiana County. Serving as President of the Association has been a highlight of this decade! It is an honor to be part of the leadership of this nearly 140-year-old Association, and one that I take seriously.

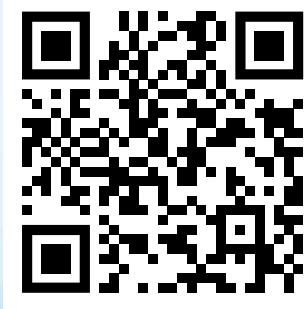
As I reflect on the successful recent CCAP Spring Legislative Conference, I thank the more than 300 commissioners, council members, other elected officials, county staff, and Association partners who attended the conference, connecting, learning, and celebrating the work of county government. I am proud to lead the charge to strengthen the voice of counties across the Commonwealth, to advocate for essential reforms and to support the membership of this Association through cost

saving programs, pro-active risk management opportunities, education, professional development, and technical assistance.

As always, I remain committed to advancing the legislative priorities of our association: 911 surcharge reauthorization and statute updates, adequate county mental health funding, and vote-by-mail reforms. Thank you for your commitment to your own communities and your support of the Association's mission to be the unifying voice of all Pennsylvania counties and provider of leadership and support for excellence in county government.

I look forward to continuing our efforts to serve our residents and strengthen the local governments that are the foundation of our democracy. ▾

"I am proud to lead the charge to strengthen the voice of counties across the Commonwealth, to advocate for essential reforms and to support the membership of this Association through cost saving programs, pro-active risk management opportunities, education, professional development, and technical assistance."



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911 Surcharge Reauthorization and Statute Updates



Counties are proud to provide one of the key functions in public safety—the operation of the 911 call-taking and dispatch system. As technologies continue to evolve and funding streams no longer align with current realities, counties need to be able to rely on consistent and sustainable funding to maintain their responsibility as the first line of emergency response.

Counties are continuously working with PEMA, legislative committees, emergency management professionals, the communications industry, and other interest groups on improvements to the 911 system. Center to this effort is forward movement and investment in Next Generation 911 (NG911) to take into account both current and future ways that people can communicate in an emergency, improvements in system efficiency through shared infrastructure and network connection for 911 public safety answering points statewide, accurate GIS information and data and better regional systems to assure availability and reliability. A strong, connected 911 system is critical to ensuring services will still be provided efficiently in situations of mass emergency to keep pace with the ever-changing technological advances to maximize emergency services delivery.

THE FACTS

- 911, while separate from our police, fire, and EMS system, provides the first response to callers, often offering medical triage advice or other critical information to ensure the safety and outcome for all involved while physical first responders are dispatched.
- The 911 surcharge is a flat-rate fee placed on a phone service bill monthly or at the point of sale for a prepaid device that provides funding for the operation of 911 emergency telecommunications services in Pennsylvania.
- At a surcharge of \$1.95, counties, and ultimately county taxpayers, are still shouldering nearly 20% of the cost of the 911 system.
- Compared nationally, Pennsylvania has a relatively average fee that covers a significant majority of 911 operational costs—other states have percentage-based or locally derived fees, including some as high as \$5.
- 911 call volume is increasing while revenue from the 911 surcharge has failed to maintain pace with system costs over the last several years
- Even outside of funding needs, the 911 statute needs technical changes and clean-ups to ensure the law meets the current realities and needs of the NextGen system.

COUNTIES SUPPORT

- Reauthorization of the 911 surcharge at a rate that brings the county share of the 911 system costs to 10-12%.
- Continued strategic planning and investment for evolving technologies and GIS data to properly support and maintain NG911.
- Opportunities for system and funding consolidation, including regional resource sharing and collaboration to guarantee system and service continuity.
- Discussion among policymakers and stakeholders well before the January 2026 surcharge sunset to ensure the reauthorization accounts for the proliferation of applications, devices, sensors, and services capable of contacting 911 and the ability to accurately assess and collect 911 surcharge revenue on these rapidly evolving consumer communications technologies.

THE BIG PICTURE

Achieving this priority would ensure all Pennsylvania residents and visitors will continue to have a quick and efficient connection to a 911 operator and services in any situation, regardless of geographic location or time of day.

Adequate County Mental Health Funding



Counties deliver critical mental health services—such as community residential programs, family-based support, outpatient care, and crisis intervention—on behalf of the state. These services must be properly funded to ensure that county residents can access the care that they need. The lack of adequate state funding has failed to keep up with demand. Coupled with growing caseloads and cost inflation, the community mental health system has been pushed to the point of collapse.

Counties currently administer direct services to support their community's mental health system. Thanks to the flexibility of the county mental health base funding allocated by the state, counties have been able to continue to serve their residents but are stretching ever more limited state funding to its breaking point. With additional state funding for the county mental health base, counties would be able to address specific needs in more meaningful and impactful ways, such as child and older adult mental health, crisis intervention and capacity, peer supports, and other diversion services. If the commonwealth cannot commit to long-term, sustainable funding for mental health services, residents will continue to suffer as it becomes harder and takes longer to find the support they need. Additionally, the impacts of underfunding trickle down to more costly systems, including hospitals, law enforcement, and corrections.

THE FACTS

- Capacity within the currently available services is inadequate to meet the need in communities. Community members frequently report wait times of at least 6 months, often much longer. Stabilization of these existing services, like addressing workforce gaps, is a critical first step.
- Counties estimate the need for the community-based system is an additional \$1.2 billion to bolster, rebuild, and add programs that adequately meet community needs.
- One-time funding for mental health initiatives can be helpful in limited circumstances but long-term programs cannot be developed without sustainable, dependable long-term funding plans.
- Without sustainability, counties cannot plan or stand-up long-term services, which can result in unspent funds despite the critically high need for community-based services.
- Mental health-based funds allow counties flexibility to meet unmet needs which vary by community, including community residential programs, family-based support, outpatient care, and crisis intervention.
- The unmet community need has created a growing population of individuals that become involved with emergency departments, law enforcement, and the criminal justice system. When no appropriate diversion exists, the remaining solutions are hospitals or incarceration, both of which are not appropriate settings for mental health treatment and are more costly.

COUNTIES SUPPORT

- Increasing and sustaining annual investments in the state's mental health community-based system to help counties maintain and rebuild the existing safety net of services, before adding other additional programs and services needed by the community.
- Investing substantial state dollars to rebuild and strengthen community crisis services, residential mental health programs, and other locally provided care that will stabilize mental health services and assist hospitals with capacity concerns.
- Maintaining local flexibility and preserving programs, such as the Behavioral HealthChoices program, so that counties can continue to provide local mental health services effectively.
- Ensuring that counties have a voice in all efforts to address behavioral health needs in the commonwealth.

THE BIG PICTURE

Achieving this priority would mean anyone in the commonwealth would be able to access timely and appropriate mental health treatment and services where they are without undue burden.

Vote-By-Mail Reforms



Counties take their responsibility for the fair, secure, and accurate administration of Pennsylvania's elections very seriously and need clear rules that enable consistent implementation across the commonwealth. The ongoing lack of clarity around provisions of Act 77 of 2019, the statute that expanded mail-in ballots, continues to create challenges for county election administration. This priority is especially urgent with the recent surge in "on-demand" requests of mail-in ballots during the 2024 General Election that inundated county staff and resources. In addition, pre-canvassing and unrealistic mail-in ballot application deadlines continue to remain important to all counties.

Since the enactment of Act 77 of 2019, counties have identified areas of the Election Code that need to be addressed and clarified in the wake of multiple court decisions and appeals to help counties meet their responsibilities for election administration and to provide efficient and accurate results. While technology improvements and more experienced county election operations led to faster counting by counties during the 2024 Presidential Election, pre-canvassing and unrealistic mail-in ballot application deadlines remain two of the most important changes that would significantly improve the election experience for both counties and voters, without sacrificing ballot security or access to voting.

Furthermore, 2024 saw an increase in voters using on-demand, in-person mail-in voting in the weeks leading up to Election Day. This led to a number of counties experiencing a significant influx of voters waiting in line to request, fill out, and return mail in ballots in one visit. Running what was effectively a third election, counties experienced significant delays and challenges due to the confusion this process caused and created additional stresses on county election administrators and staff while trying to prepare for Election Day. Counties need the support of the legislature and administration to update these and other key areas of the Election Code so that counties have clear rules ensure the public remains confident in the integrity of our elections.

THE FACTS

- Since its enactment in 2019, Act 77 remains unclear, or in some cases silent, on how counties should address certain situations, such as what to do with naked ballots and whether voters should be contacted and permitted to cure defects with their mail-in ballot. Procedures for handling and processing un/misdated ballots have also become a point of great legal debate.
- The lack of clarity resulting from Act 77 continues to create new challenges for counties, including the influx of voters across the commonwealth engaging in on-demand, in-person mail-in voting during the 2024 General Election, placing additional stress on county election offices and staff that worked to remain in compliance with the Election Code despite the unclear rules for these situations.
- Changing court decisions, in addition to the statutory language or lack thereof, have led to a situation where counties have struggled to implement the law consistently.
- Giving counties the ability to pre-canvass will help with managing workloads on Election Day, particularly in a busy presidential year, where timely results will be anticipated given the high level of attention that will be paid to Pennsylvania on election night and beyond.
- Mail-in ballot deadlines, including the application window, create timing challenges with the postal service and within county election offices. Further clarification and extension of timelines will benefit voters by providing more time for the ballot to be able to get from the county to the voter and back again through the mail, creating less uncertainty over whether ballots were received by 8 p.m. election night.

COUNTIES SUPPORT

- Resolving ambiguities and gaps in the Election Code for which counties need clarity and uniformity, including provisions related to the law on counties' authority to use drop boxes for mail-in ballots as well as clear and concise guidelines for curing ballot defects and third parties sending in mail-in ballot applications.
- Extending the pre-canvassing period to allow ample time for counties to prepare mail-in and absentee ballots for tabulation so that accurate results can be provided as soon as possible.
- Moving back the deadline for absentee and mail-in ballot applications to 15 days prior to an election, so that voters can be confident there is plenty of time for their county to process the application and for the ballot to be mailed from the county to voter and back again.
- Ensuring any changes to Act 77 or the Election Code are enacted and allow enough time for implementation well before the next regularly scheduled election.
- Ensuring that counties are involved in discussions on any election law reforms at the earliest possible point, to create positive, meaningful, and effective election policy moving forward.

THE BIG PICTURE

Achieving this priority would give counties the tools they need to continue to run fair, secure, and accurate elections while restoring public trust in the election system.



An Election Director's Take on

Improving PA Elections

By **Forrest K. Lehman**, Director of Elections and Registration, Lycoming County

The November 2024 General Election may be over and in the rearview mirror, but ask any county election official and they will tell you that presidential elections cast a long shadow.

I have been a county election director for 10 years, which rounds up to 1 million years. I was here for 2016, 2020, and 2024. With respect to election administration, Pennsylvania counties are in pretty much the same place they have been ever since the passage of Act 77 of 2019 – exhausted. Counties remain frustrated by the lack of state-level action to resolve longstanding ambiguities in the Election Code, which has spawned a stubborn media narrative that counties aren't "consistent" in how they run elections and has driven a carousel of litigation.

To give credit where it is due, the Election Integrity Grant Program established by Act 88 of 2022 was a welcome state-level investment in election administration. The counties badly needed the funding, which allowed us to improve our election delivery infrastructure in ways that otherwise would not have been possible.

However, money isn't a magic wand. It can't solve all of Pennsylvania's election administration challenges. For example, money can't buy the time that counties need to pre-canvass mail ballots before Election Day. Counties have been asking for additional pre-canvassing time ever since

Act 77, so that our attention is not divided between our mail ballots and our polling places while the polls are open. Even a day or two of pre-canvassing would ensure that counties can focus Election Day resources where they rightfully belong – on the in-person voting.

Additionally, money can't fix Pennsylvania's broken excuse for "early voting" that requires applying in person for a mail ballot. The daily, unending lines of voters who requested mail ballots over the counter during the runup to the election were an administrative nightmare that undermined counties' preparations to conduct an actual election on Election Day. An in-person form of early voting that dispenses with the administratively complicated trappings of the mail ballot process, and corresponding reform of the mail ballot application deadline to 14 days before each election, would let counties deliver more early voting, and to do it more quickly.

Finally, counties are tired of being targeted by the media, the public, and even by elected officials for the alleged "inconsistencies" in how we carry out elections. As long as I have been doing this job, counties have been asking the Governor and the Legislature to take action to resolve longstanding ambiguities and silences in the Election Code, which would promote greater uniformity in election administration across the Commonwealth.

"...counties are tired of being targeted by the media, the public, and even by elected officials for the alleged "inconsistencies" in how we carry out elections."

The public and the media should be asking state government when it plans to do something. There may be a narrow window of opportunity for dialogue and action on election reform this year, since we are out of the presidential election cycle. Until and unless state-level election reform happens, however, counties will have no choice but to adopt their own policies and procedures when the Election Code is ambiguous or silent. ▼



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GET TO KNOW YOUR NEW CCAP PRESIDENT

SHERENE HESS



County: Indiana

Serving Since:

Sherene Hess began her term as commissioner for Indiana County in 2016. Her dedication to public service has helped shape the direction of her county and position her as a leader in Pennsylvania's local government landscape.

sive Rails to Trails system, a variety of yearly festivals and a community of Old Order Amish families. Along with being the birthplace and childhood home of Hollywood actor Jimmy Stewart, it is also known as the "Christmas Tree Capital of the World™" and home to Indiana University of Pennsylvania as well as the Kovalchick Convention & Athletic Complex. Indiana County is known for its rural landscape, closely connected communities, and historical landmarks. The county's economy has traditionally been rooted in industries such as coal mining, agriculture, and manufacturing. Over the years, Indiana County has worked to diversify its economy, focusing on education, healthcare, financial services and energy. With a strong sense of community and a mix of both small town and rural areas, Indiana County is a place where tradition meets opportunity.

to grow and thrive, which in turn supports job creation and a strong local economy.

- Environmental Stewardship: Leveraging her experience in conservation to push for sustainable practices that protect natural resources and ensure long-term environmental health.
- Infrastructure: Ensuring the county's roads, bridges, and public facilities are well-maintained and equipped to serve the growing needs of the population.
- Health and Safety: Working on initiatives to improve health and ensure that all residents have access to critical services.

Overall, what are the most important issues PA counties are facing right now?

As president of the County Commissioners Association of Pennsylvania (CCAP), Sherene recognizes several overarching issues that are affecting counties across the state, including:

- Funding for Local Government: The struggle to secure adequate funding for counties to manage and deliver critical services, especially in the mental health space and delivery of emergency response, all while facing the reality of state budget constraints.

WHAT INSPIRED YOU TO BECOME A COUNTY COMMISSIONER?

Sherene's journey into local government began with a strong commitment to serving her community. Inspired by a desire to positively affect the lives of her fellow residents, she recognized that being an elected official would allow her to address critical issues like delivery of human services, infrastructure, public safety, and economic development, while also advancing environmental stewardship, an area she has been passionate about since graduating from the College of Agricultural Sciences at Penn State University in 1990.

Tell us a little about your county.

Indiana County is a region rich in natural beauty and history. Located in the foothills of the Allegheny Mountains, just one hour east of Pittsburgh, it is home to an exten-

WHAT ISSUES HAVE BEEN THE MOST IMPORTANT TO YOU DURING YOUR TIME AS COMMISSIONER?

During her tenure as County Commissioner, Sherene has focused on several key issues, including:

- Economic Development: Creating opportunities for businesses



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As someone deeply involved in local government, she wanted to be part of an organization that could help shape the future of Pennsylvania's counties and ensure their voices were heard in state policy decisions.

- **Public Health:** Addressing the ongoing challenges posed by public health issues such as the opioid crisis and COVID-19 recovery.
- **Environmental Sustainability:** Ensuring that counties continue to develop in a sustainable way, balancing economic growth with the need to protect natural resources.
- **Infrastructure Needs:** Many counties are grappling with aging infrastructure, including roads, bridges, and public utilities, which require significant investment.
- **Workforce Development:** Ensuring that counties have the trained workforce necessary to support local businesses and address evolving technological needs.

WHY DID YOU GET INVOLVED WITH CCAP?

Sherene's involvement with CCAP stems from her passion for advocating for the needs of Pennsylvania's counties. By joining the association, she saw an opportunity to collaborate with fellow commissioners across the state, share knowledge, and develop solutions to common challenges. As someone deeply involved in local government, she wanted to be part of an organization that could help shape the future of Pennsylvania's counties and ensure their voices were heard in state policy decisions.

WHAT DO YOU HOPE TO ACCOMPLISH AS CCAP PRESIDENT?

As CCAP President, Sherene is committed to:

- **Advocacy and Collaboration:** Strengthening relationships with state and federal officials to ensure counties have the resources and support they need to serve their residents.
- **Supporting Local Government:** Ensuring that county commissioners have the tools, support, and training necessary to be effective leaders within their communities.
- **Addressing the Funding Challenges:** Working to address the ongoing funding challenges faced by counties, ensuring adequate resources to maintain public services that are vital to the health and well-being of Pennsylvanians and the communities in which they live and work.

ARE YOU INVOLVED IN ANY OTHER LOCAL GOVERNMENT GROUPS OR ORGANIZATIONS?

In addition to her role with CCAP, Sherene is involved with various social, racial, environmental, LGBTQ+ justice-focused organizations and government agencies that are aimed at the overall betterment of lives locally and throughout the Commonwealth.

She has worked in the environmental stewardship arena since 1990 and continues to be active in advocating for policies that protect natural resources while supporting local development.

WHAT MESSAGE DO YOU WANT TO SEND TO CCAP MEMBERS?

Sherene wants to send a message of unity, collaboration, and resilience to CCAP members. She believes that the strength of Pennsylvania's counties lies in the ability of commissioners to work together, share resources, and tackle challenges collectively. She encourages members to remain focused on their shared goals, especially as they navigate difficult issues such as funding gaps, public health and safety, community revitalization and economic development, and sustainability. By supporting one another and remaining committed to the best interests of our constituents and communities, Pennsylvania's counties will continue to thrive.

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HEAR YE! HEAR YE! CUMBERLAND COUNTY RINGS IN 275TH ANNIVERSARY

County Commissioners celebrate Generations in the Making; Past, Present and Future.

On a crisp January morning, the echoes of history rang through Cumberland County as Town Crier Jim Griffith, dressed in a crimson cutaway coat and black tri-cornered hat, proclaimed the county’s founding 275 years ago. Residents, county officials, and employees gathered at the Veterans Memorial Courtyard on January 27, 2025, to mark this historic milestone.

Established in 1750 and named in honor of Cumberland, England, the county has played a vital role in shaping Pennsylvania’s history. Commissioner Gary Eichelberger reflected on its contributions, stating, “Our county was instrumental in the Revolutionary and Civil Wars and contributed supplies, food, weapons, and soldiers to the fight for independence.”

A highlight of the celebration was the recognition of ten county employees whose combined years of service matched the county’s own milestone—275 years. Commissioner Jean Foschi praised their dedication, saying, “With more than 1,000 employees working tirelessly to serve our residents, these individuals are the backbone of our county.”

From its humble beginnings with just 3,000 residents, Cumberland County has grown into one of Pennsylvania’s fastest-growing communities, now home to more than 270,000 people across 33 municipalities. With this growth comes the challenge of evolving to meet residents’ needs. “We are proactively planning for a future whereby we continue some of the tried-and-true practices of the past while using new tech-



nology to transform operations,” said Commissioner Kelly Neiderer.

As the ceremony concluded, bells tolled across the county, and Commissioner Neiderer proposed a celebratory toast with hot chocolate: “Here’s to 275 years of history and many more years of growth, prosperity, and shared success. May we continue to honor our past, celebrate our present, and embrace our future together.”

With a rich history behind it and a promising future ahead, Cumberland County remains a vibrant and evolving community—one that continues to honor its legacy while embracing the opportunities of tomorrow. ▾

TWO CHANGES

TO IMPROVE THE VOTING EXPERIENCE

By Sean D. Drasher, Director of Elections, Lebanon County

Elections in Pennsylvania have both their charms and their challenges. The bottom up structure of County-based elections gives the Commonwealth a strength that is evident at the local level, but can be a bit confusing when viewed from outside our borders. I get it. It's much easier to picture the State as one single system with one, clear set of processes. One, clear set of traditions. One, single set of physical election equipment.

Still, for all these unique systems there are still simple changes that could be made at the State level that would instantly benefit us all. And they need not be controversial, world changing updates to the code. There are two changes that would immediately improve the voting experience for voters, and the efficiency of the county operations instantly upon adoption:

1. Move forward the registration window by two weeks.
2. Establish an early voting procedure independent of the mail-in voting process

The first point is very straight forward. The current registration window closes 15 days prior to the election day, and the mail in ballot request window closes 7 days prior to the election. While I can appreciate the noble attempt to give potential voters as much time as possible to get their paperwork submitted, this has had the unexpected affect of hurting many more voters than it helps.

The established separation of the registration and mail-in deadlines is well thought through. The vot-

er registration deadline needs to be at least a full week ahead of the mail-in request deadline so that Counties have the time to process those registrations separately. Voter Registration clerks need time to be able to process all that paperwork once it arrives, and the voter registrations need to be completed before the mail-in requests (for the same voters) can also be completed.

Moving this date forward would negatively impact a minimal number of voters, the vast majority of who register long before the deadline. It's logical to deduce that those late arriving registrations wouldn't disappear, they'd simply be submitted earlier. This would have almost no impact on our registration numbers.

It would, however, have a massive impact on something else: Mail-In ballots.

Right now, Mail-in ballots can be requested so late in the election cycle that voters submitting their requests essentially have no hope in having that ballot arrive in the mail. This is a huge source of pain for both voters and Counties, and County elections offices are getting blamed for dropping the ball when in fact it is the calendar that is creating the chaos.

Further, after the local elections offices, the Postal Service gets blamed for much of these late deliveries. Local officials certainly don't want to take responsibility for voters failing to get their ballots (after all, they are doing everything correctly!) so the next logical place to place the blame are local postal offices. But is that fair? Not really. Let me explain.

On the Tuesday prior to the election a voter requests their ballot. It is immediately processed, and the package is created and dropped in the mail. There is a very good chance that mail pick-up will now, at best, be on Wednesday. From there it's a reasonable expectation that it will take 3 business days to deliver that request to the voter. This, if everything goes perfectly, means that the voter will get their ballot on Monday or Election Day itself.

Folks, that doesn't work.

Because that voter must complete their ballot and then DELIVER IT TO THE ELECTION OFFICE (post marks don't count!) before 8pm on Election Day! This is nearly impossible for most voters. In most cases, if they are requesting the mail-in ballot it is because they can't get to the polling place in their neighborhood on Election Day, let alone to a central county courthouse or elections office.

And that's the ideal situation described above. In reality, limited resources easily add an extra day or two to that mail-in ballot cycle. That means that not only do voters get the ballots too late to mail their ballots back, they often get them in the mail after the election is over altogether. This is unacceptable. And Counties should not have to take the blame for failing to deliver a ballot that has almost no hope of successfully getting to the voter in the first place.

This has created serious doubts in voters regarding the integrity of the voting process and generated significant anger towards local elections officials. It is unacceptable for the voters, and it is unacceptable for the Counties. It must be addressed, and the only way to do so is to move that window forward by 2 weeks or more.

The second thing that needs to be addressed is more complicated, but no less important. Pennsylvania currently has no proper early voting system. Despite this, the citizens of the Commonwealth are bombarded with media and political messaging pushing them to vote early. Literal parties are set up on Courthouse lawns in an effort to drive large turnout in early voting.

But PA has no real early voting.

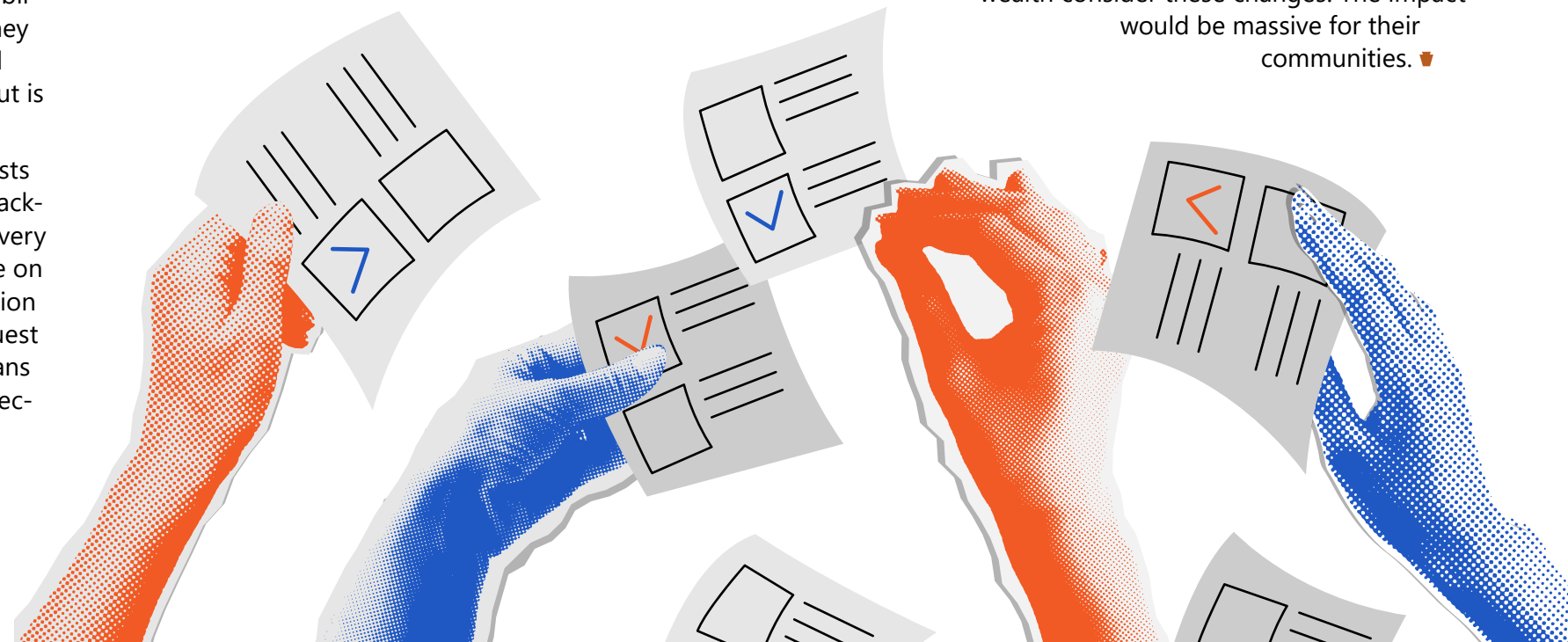
Instead we have mail-in voting, and those ballots can be picked up in person after the proper paperwork has been processed. On an occasional basis, this is quite manageable. The in-office process is a bit slow, but voters can avail themselves of it in a pinch. However, as our voters more and more embrace this voting option these lines have become crowds. Large crowds. And its lead to terrible voting experiences across the entire State for voters of every Party.

Its not just bad for voters, its terrible for local voting offices. Its simply impossible to keep up with the volume of voters that are crowding our offices. If you visit many voter offices you'll see that they aren't even set up to handle more than a few visitors at a time. Its simply not what the space is designed for! And further, many offices only have a few employees that have no hope of keeping up.

The current structure of early voting and the local elections offices is setting up a process that grinds elections to a halt. Officials simply don't have the time to set up and run the actual elections because they are crushed under the demand for early voting.

This poorly designed process has cast Pennsylvania in a very unflattering light in the national news. Camera crews are quick to show our long lines, disgruntled voters, and accusations of imagined fraud by the poor staffers working themselves to the limit just to be accused of disenfranchising (or worse) the communities they know and love.

I respectfully ask that the lawmakers of this Commonwealth consider these changes. The impact would be massive for their communities. ▾



Evolving Mental Health Landscape

IN ALLEGHENY COUNTY

By **Erin Dalton**, Director, Allegheny County Department of Human Services

The pandemic exacerbated mental health challenges nationwide, and Allegheny County was no exception. Between 2019-2023, calls to Allegheny County 9-1-1 related to behavioral health concerns increased by 20%.

The problem is not only about demand – it’s also about the complexity of the challenges people are facing. Mental illness is frequently compounded by homelessness, substance use and justice system involvement, requiring creative, non-traditional interventions. However, many of these solutions—especially those that reach marginalized and underserved populations—are not reimbursable through Medicaid. Instead, they rely on state mental health base funding, which has remained flat for over a decade.

THE IMPERATIVE FOR ENHANCED STATE MENTAL HEALTH BASE FUNDING

State mental health base funding is pivotal in supporting services not covered by Medicaid or private insurance. These services encompass housing supports for individuals with serious mental illness, school-based programs addressing mental health and substance abuse, and services for uninsured or underinsured populations, including those re-entering the community post-incarceration.

After state cuts in 2013, county mental health base (MH Base) funding remained flat for more than a decade, despite increased needs and costs. DHS’s MH Base allocation in SFY 2025 increased by \$2.8M over SFY 2023. While helpful, this represents less than 4% of the county’s total MH Base funding in each of the last three years and falls far short of addressing the state’s long-term underinvestment.

INITIATIVES DEPENDENT ON STATE FUNDING

Allegheny County has pioneered several community-driven approaches that are only possible with state MH Base dollars. Examples include:

Informal Mental Health Supports (By Community, For Community)

Recognizing that traditional clinical settings may not effectively reach all individuals, DHS funds 14 community-led and community-operated organizations to provide informal mental health supports. These non-clinical services, delivered by peers, family members, religious leaders and other non-health professionals, aim to engage community members who might distrust or feel alienated by conventional providers. The overarching goals are to increase accessibility, foster trust and bridge gaps to formal care.

Housing for People Struggling with Serious Mental Illness

Since the closing of state hospitals, counties have picked up the responsibility of housing people with serious mental illness. We rely on state dollars to support housing for people with mental illness, including those stepping down from a hospitalization or directly from a crisis. As is true in many communities in the Commonwealth, instead of people getting mental health and other treatment delivered to them in community supported housing, many of our seriously mentally ill neighbors end up in homeless shelters, on the streets or in jail. We are investing in more supported housing to reduce this likelihood. With more resources, we are confident that over 1,500 individuals in our community would be eligible for this care. These are community

members who confront staggeringly high rates of hospitalization, homelessness, incarceration and premature death. They would benefit from temporary housing support on their path to recovery, which cannot be paid for by Medicaid. DHS spends most of our state mental health funding on these residential programs, which are the community-based alternative to people living in state institutions.

Mobile Crisis Response

Mobile crisis teams are one of the most critical components of our mental health system; they provide on-site mental health intervention, dispatched from our county’s 9-8-8 crisis call center. These teams are an essential part of the county’s effort to move toward a health-centered approach that prioritizes de-escalation, treatment and recovery. On average (from 1/31/2024 through 12/31/2024), mobile crisis teams were dispatched throughout Allegheny County about 178 times per week; they provided interventions/services to an average of 616 people each month. While traditional mobile crisis teams are billable to Medicaid, Allegheny County has piloted non-traditional models of mobile crisis response focused on responding to unhoused and transient individuals. For the model to work well for this population, proactive outreach, relationship building and, therefore, flexible funding are essential.

Deflection and Alternative Response Initiatives

Allegheny County is actively piloting the Law Enforcement Assisted Diversion (LEAD) model in 16 communities, enabling police to redirect individuals accused of low-level, non-violent offenses—such as drug possession or public intoxication—toward community-based treatment and social services instead of jail. Instead of adding to the cycle of incarceration, LEAD seeks to address the root causes of crime through intervention and care. Again, this work isn’t fully billable to Medicaid, so we rely on state dollars to connect these vulnerable individuals to help.

Additionally, in December 2024, Allegheny County launched the Alternative Response program, introducing behavioral health first responders to address human service and behavioral health 9-1-1 calls, reducing reliance on law enforcement for such situations. This

initiative, known as the A-Team, offers a more appropriate response to mental health crises, aiming to improve outcomes and ensure individuals receive the care they need. The program operates in three primary ways:

- As an alternative to law enforcement
- In tandem with law enforcement
- Following a law enforcement interaction

The A-Team exemplifies a shift towards specialized responses for mental health emergencies, aligning individuals with suitable services and reducing potential negative interactions with the criminal justice system.

CHALLENGES AND THE PATH FORWARD

These are exactly the kind of modern, community-based solutions needed to tackle today’s mental health crisis. Without creative and thoughtful ways to engage people with serious mental illness, our system’s treatment services won’t have a chance to work and help people in need.

After years of flat funding, we cannot bring these solutions to scale without significant increased investment.

CONCLUSION

Initiatives like informal mental health supports, crisis response and alternative response programs are pivotal in addressing diverse community needs. However, the sustainability and expansion of these programs hinge on increased state mental health base funding. By investing adequately in these services, Pennsylvania can ensure that all residents—regardless of income, insurance status, or disability-- have access to the mental health support they require, fostering a healthier and more resilient community. ▾

Next Generation 911

ADVANCING EMERGENCY RESPONSE IN PENNSYLVANIA

By **Frank Mazza**, CCAP Director of Government Relations

In Pennsylvania, the heart of our 911 system is comprised of county-based call centers

(referred to as Public Safety Answering Points, or PSAPs) and their highly trained staff of

telecommunicators. The delivery of 911 services requires a combination of personnel,

facilities, and complex systems and technology to be available 24 hours a day, 365 days a year

to ensure that both the public and field responders receive the level of service that is expected and required in emergency situations. Counties in Pennsylvania are proud to provide this critical public safety service on behalf of more than 13 million Pennsylvanians and many more guests who visit our commonwealth each day.

Since the Pennsylvania General Assembly passed Act 12 of 2015, Pennsylvania has been undergoing a major transformation in emergency response with the implementation of Next Generation 911 (NG911).

This statewide system modernizes emergency communication systems, replacing outdated analog infrastructure with advanced digital capabilities to improve emergency response efficiency and effectiveness. As of the publishing of this article, 65

of Pennsylvania's 67 counties are active on the NG911 system, and we anticipate that all counties in the Commonwealth will be operating in the NG911 environment before the end of 2025.

WHAT IS NG911?

By the beginning of the 21st century, it became clear that the outdated 911 system needed modernization to keep up with contemporary communication technology. Legacy systems from the 1970s struggled with integrating text messaging, video calling, and accurate location tracking, especially with the rise of wireless and VoIP communications. To address these challenges, the U.S. Department of Transportation launched the Next Generation 911

(NG911) Initiative in 2004.

NG911 aims to create an interconnected, nationwide Emergency Services IP Network (ESInet) that allows seamless, secure, and redundant communication between Public Safety Answering Points (PSAPs) and first responders. A key improvement is the transition from traditional databases to Geographic Information Systems (GIS) for precise call routing and location detection. By integrating GIS, NG911 enhances emergency response by providing accurate caller locations, jurisdictional boundaries, and historical event data, ensuring a more efficient and resilient emergency communication system.

THE NECESSITY OF NG911 IN PENNSYLVANIA

Pennsylvania's 911 centers handle over 14 million emergency calls annually, making efficiency and accuracy in call processing essential. The existing analog infrastructure was designed decades ago and

does not support modern digital communication methods, potentially delaying emergency response times.

Additionally, the state experiences extreme weather events, natural disasters, and cybersecurity threats that place strain on emergency response systems. NG911 is designed with built-in redundancies, improving system resilience and reducing the risk of service interruptions during crises. The shift to a digital emergency network ensures that Pennsylvania's emergency communication infrastructure remains reliable and adaptable to evolving threats.

KEY FEATURES OF NG911

1. Text-to-911 Services – Enables individuals to send text messages to 911, benefiting those who are deaf, hard of hearing, or in situations where speaking aloud could be unsafe.
2. Improved Location Accuracy – Utilizes GIS technology to precisely determine caller locations, reducing response times and improving

emergency service dispatching.

3. Multimedia Capabilities – Allows callers to send images and videos to emergency dispatch centers, offering responders better situational awareness before arriving on the scene.

4. Enhanced Call Routing – Routes emergency calls based on real-time caller location rather than the origin of the phone number, ensuring faster and more accurate dispatching.

5. Increased System Resilience – Operates on a robust, redundant network, reducing the likelihood of service disruptions due to technical failures or cyberattacks.

NG911 IMPLEMENTATION ACROSS PENNSYLVANIA

The Pennsylvania Emergency Management Agency (PEMA) is responsible for overseeing the statewide rollout of NG911. All 67 counties in Pennsylvania have access to the statewide Emergency Services Internet Protocol Network (ESInet), a

foundational component of NG911. The ESInet enhances network resilience and facilitates seamless communication between emergency response agencies.

PEMA continues to work closely with counties to complete the full migration to NG911. This transition involves upgrading call-handling systems, ensuring GIS compatibility, training emergency personnel, and implementing cybersecurity measures to safeguard the digital infrastructure. As of the publishing of this article, 65 of Pennsylvania's 67 counties are active on the NG911 system, and it is anticipated that all counties in the Commonwealth will be operating in the NG911 environment before the end of 2025.

LEGISLATIVE CHANGES IMPACTING 911 SERVICE DELIVERY: ACT 34 OF 2023 AND ACT 147 OF 2024

Several legislative changes have been enacted since the start of the

2023-2024 legislative session started in January 2023 and wrapped up in December 2024. Two major legislative initiatives that counties were key stakeholders in advocating for were passed by the legislature to support the transition to NG911, ensuring that Pennsylvania's emergency response infrastructure remains properly funded and technologically advanced.

ACT 34 OF 2023

Act 34 of 2023 reauthorized the existing statutory authority for 911 in Pennsylvania to January 2029 and reauthorized the 911 surcharge through January 2026. Most importantly for counties, Act 34 increased the \$1.65 rate to \$1.95, which provided an estimated \$47 million increase in funding for county 911 operations. In 2024, the increased surcharge rate produced roughly \$370 million in revenue for the 911 fund against a total system cost of \$450 million (est.). As such, even with the increased surcharge counties continue to share a significant burden of the cost to the 911 system, paid for by property taxpayers.

Act 34 also authorized the Pennsylvania Legislative Budget and Finance Committee ("LBFC") to conduct a study on efficiencies to be gained within Pennsylvania's 911 system and look at issues like integration of the 911 with other systems such as the 988 Lifeline and Pennsylvania State Police ("PSP") systems. The report, while statutorily required to be submitted to the General Assembly by the end of December 2024, is now expected to be completed late in the Spring of this year.

ACT 147 OF 2024

Act 147 of 2024 provided for updated statutory language to account for the rapid enhancement in technologies and began the process of modernizing Pennsylvania's 911 statute

to account for the significant technology changes brought on by NG911. Act 147 was a significant step to facilitate Pennsylvania's transition from analog Enhanced 911 service to digital NG911 service.

Key provisions of Act 147 include targeted amendments to the Right-to-Know for NG911, stricter penalties for misuse of the 911 system, and new requirements for communications providers to report service outages. Additionally, Act 147 extends the financial audit cycle for Public Safety Answering Points (PSAPs) from every two years to every three years, streamlining oversight.

These reforms mark a transformative step to modernize Pennsylvania's 911 infrastructure, creating a resilient and fully integrated system capable of delivering faster, more effective emergency response services. Act 147 empowered counties to keep pace with technological advancements, enhancing public safety and strengthening emergency response capabilities in communities across the Commonwealth.

LOOKING AHEAD IN 2025: FURTHER CHAPTER 53 UPDATES AND SURCHARGE REAUTHORIZATION

Additional legislative work is needed to update other soon-to-be obsolete provisions of Title 35, Chapter 53 due to Pennsylvania's transition to NG911, to define Pennsylvania considerations related to newly adopted federal rules for NG911, and to keep pace with rapidly changing consumer technology. In addition, the \$1.95 fee is scheduled to sunset in January 2026. The 911 fee is the primary funding source for Pennsylvania's 911 system. A key focus of 911 system stakeholders is to reauthorize the 911 fee this year with an appropriate increase to account for estimated annual cost increases prior to the sunset date.

The transition to NG911 presents several challenges, including funding, technological integration, and cybersecurity concerns. Upgrading emergency communication systems requires significant investment in infrastructure and ongoing maintenance. Additionally, training personnel on new technologies and protocols is essential to ensure smooth implementation.

Cybersecurity remains a critical focus area. With NG911 operating on digital networks, emergency response systems are more susceptible to cyber threats.

A continuing concern for the 911 stakeholders is the proliferation of applications, devices, sensors, and services capable of contacting 911 and the ability to accurately assess and collect 911 surcharge revenue on these rapidly evolving consumer communications technologies.

THE FUTURE OF EMERGENCY RESPONSE IN PENNSYLVANIA

The adoption of NG911 marks a significant advancement in Pennsylvania's emergency response capabilities. The transition to a digital, data-driven system enhances communication efficiency, improves emergency response accuracy, and ensures that Pennsylvania's 911 infrastructure remains modern and resilient.

As NG911 implementation progresses, continued investment in infrastructure, training, and cybersecurity measures will be essential to maintaining the effectiveness and reliability of emergency response services across the state. The shift to NG911 represents a forward-looking approach to public safety, leveraging modern technology to enhance emergency response and save lives. 🍀

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2025 CCAP Spring Conference

The 2025 CCAP Spring Conference was held from March 16-18 at the Harrisburg Hilton. Known as "CCAP's Legislative Conference," the Spring Conference provided opportunities to members to participate in programming of educational and professional value. While in the capital city, members attended a legislative reception and visited the Capitol during a House session.



Opening General Session at the 2025 CCAP Spring Conference



Indiana County Commissioner and CCAP President Sherene Hess



Desiree J. Nguyen
Managing Director, Insurance Programs, CCAP



NACo President
James Gore



PCoRP Dinner and Awards Ceremony



David Wilson, Deputy Managing Director, City of Philadelphia



Sam (left) and Bill (right) Worley



Warren County Commissioner Tricia Durbin



Jill Varner, Penn State Extension



Heather Hiestler, CCAP Director of Technology Programs and Partnerships



Clearfield County Commissioner Dave Glass



Frank Mazza, CCAP Director of Government Relations



Clinton County's Hannah Park and Commissioner Jeff Snyder share a laugh at the PCoRP Awards Ceremony





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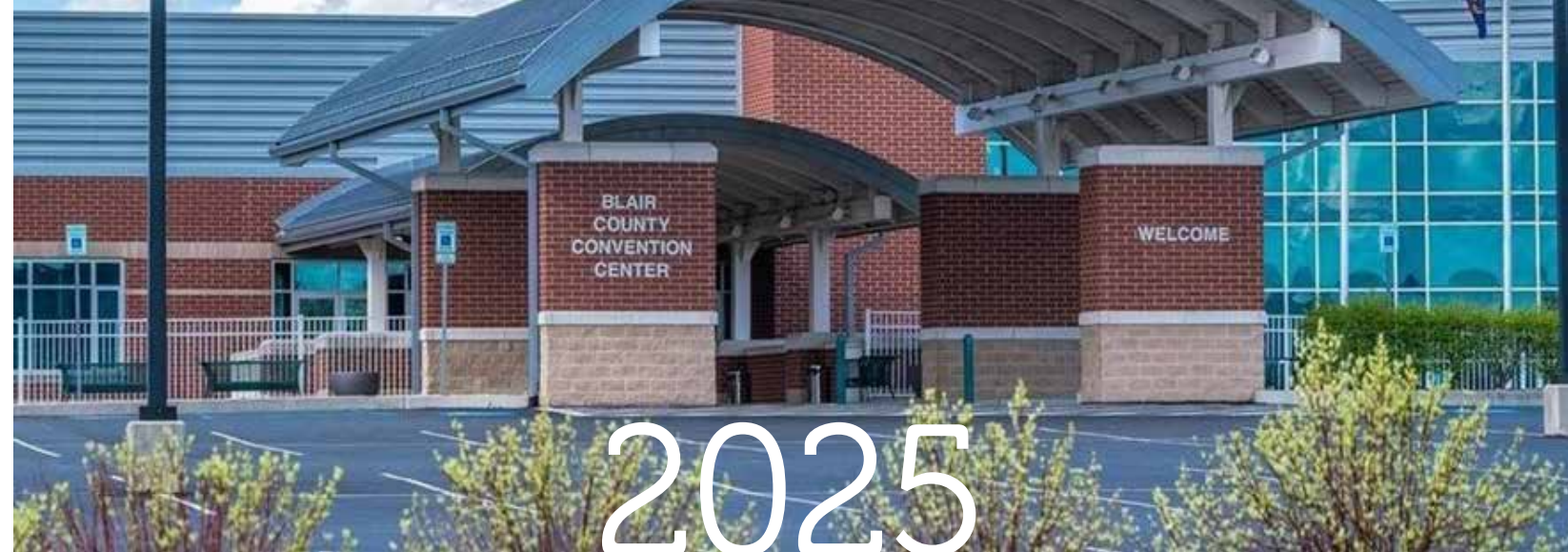
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2025

County Administration Conference

MAY 14-15

The CCAP County Administration Conference (CAC) is designed specifically for county personnel in administration, human resources, finance and technology.

Breakouts and roundtables are the highlights of this conference, allowing county members to learn from leaders in their respective fields while also actively engaging with peers. Attendees will leave the conference prepared to utilize new skillsets and implement best practices that will improve operational efficiency in county government.

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CCAP Health Alliance

Q What is the CCAP Health Alliance?

A In 2012, CCAP partnered with the Delaware Valley Health Trust (DVHT) to launch a state-wide nonprofit governmental health program called the CCAP Health Alliance. This program offers Pennsylvania Counties and qualifying County Related Entities upfront savings, enhanced benefits and long-term cost stability.

Q Why did CCAP choose DVHT as their partner in this endeavor?

A DVHT was formed by local government for local government. They are not brokers. They are a self-insured governmental risk pool serving municipalities, school districts, counties and authorities in Pennsylvania and Delaware. They are non-profit and tax exempt. They currently cover 165 public entities and over 9,700 employee lives (over 25,000 member lives). Since inception, their group retention rate is over 95%, and they remain in a strong financial position, with surplus levels meeting the prudent industry standards.

Q What coverage, benefits and value-added services does the CCAP Health Alliance offer?

A The CCAP Health Alliance offers a complete range of medical, dental and vision plans, fully customized to meet the needs of each individual county or entity. Members enjoy stable rates, COBRA administration, an online Benefit Portal for coverage changes and open enrollments, compliance assistance with the Affordable Care Act (including preparation of IRS Forms, 1094-C and 1095-C) and access to FSA, HRA and HSA administrators. The program

also offers the following value-added benefits at no additional cost to the members:

- **A voluntary, comprehensive Wellness Program,* with cash incentives for participating employees and their spouses each year, including:**

Biometric Screening
\$150

Colonoscopy Screening
\$150

Women's Well Visit
\$50

Mammogram
\$50

Hospital-Based Education
\$100

Gym Membership reimbursement
up to \$300

Fitness event reimbursement
up to \$200

WW reimbursement
up to \$200 (formerly *Weight Watchers*)

Bike (sport) helmet reimbursement
up to \$25; dependent children also eligible

* Proof of procedure/attendance will be required for all Wellness Program submissions of incentives and reimbursements.

- **A dedicated Health Claims Specialist to provide member support and advocacy**
- **Health Trust Resources which include an Employee Assistance Program, Nurse Navigator and access to Healthcare Bluebook.**
- **Teledoc**
- **Access to group life and long and short-term disability, with no broker fees or commissions.**



Q How can the CCAP Health Alliance aid in risk financing/saving us money?

A As with other CCAP Insurance Programs, the CCAP Health Alliance is working towards a long-term solution to healthcare financing. The CCAP Health Alliance's risk sharing model offers a number of advantages, including:

- Excess funds are returned to the membership. A rate stabilization fund (RSF) is a unique tool allowing each member the option of applying credits to monthly premium, thereby reducing payments. Members also have the choice of rolling their credit balance over to future years. In effect, the RSF allows each member the discretion of choosing the most opportune time to apply its own rate relief. The CCAP Health Alliance adds interest to any rolled over balance.
- An expense ratio well below commercial fully insured or self-insured programs, without brokerage commissions or premium taxes.
- Investment income accruing only to the benefit of the membership.

- Improved control of health insurance premium dollars, products, services and management.
- The ability to unbundle components of the plan (reinsurance, prescriptions, etc.) in order to take advantage of more competitive alternatives.
- On average, CCAP Health Alliance members save 3-6% on health insurance costs.

Q How can I learn more about the CCAP Health Alliance?

A Contact Desiree Nguyen, Managing Director, Insurance Programs at dnguyen@pacounties.org. She can coordinate a virtual meeting where the program can be explained in more detail, and you can ask any questions you may have regarding the program. 📌

Community Resiliency

STARTS WITH LOCAL CONNECTIONS

By PA Department of Human Services Emergency Response Team



“THAT NEVER HAPPENS HERE!”

These words echo in every community, until it does happen here. The morning of Friday, August 9, 2024, brought what seemed to be a typical late summer rainstorm in Pennsylvania, but the water just kept coming. Some areas in north central Pennsylvania received more than 6 inches of rain, as the remnants of Tropical Storm Debby pummeled the Northeast. Tiny creeks and streams became angry, raging rivers. Rising water swamped homes and businesses. Some buildings were lifted entirely off their foundations, while others were badly damaged or filled with inches of muck. Some residents lost everything. Sadly, one Tioga County man was killed.

WHERE IT CAN RAIN, IT CAN FLOOD

Many survivors did not have flood insurance because they do not live in an area with a higher chance of experiencing a flood or areas where flood insurance is required. Without appropriate flood insurance, home damage and loss of personal property was uncompensated. All Pennsylvanians should consider purchasing flood insurance, because just one inch of rain can cause upwards of \$25,000 of damage to a home. Visit www.ready.pa.gov and look for information on top threats in Pennsylvania.

HELP ON THE ROAD TO RECOVERY

Amidst the devastation, helpers did abound, bringing assistance and hope to the survivors. A federal disaster was declared, making financial assistance from FEMA available. Also heartening were the connections to local and commonwealth resources.

A senior resident of Lycoming County turned up at the Disaster Recovery Center (DRC) to see what help was

available for him and his wife, who uses a wheelchair, after Debby flooded their first floor with 6 inches of water. At the DRC, he applied for FEMA benefits and, having served in the armed forces, he was also able to complete an application for a lesser-known Veterans Temporary Assistance program. This netted an additional \$1,600 in financial assistance, which he received in just a couple of days. The County Veterans Affairs office provided copies of the necessary forms and assisted in their completion, directly benefitting this veteran and helping this veteran and his wife recover from the flooding. This is just one of many social service programs that can provide a benefit to disaster survivors if the right connections are made.

THE POWER OF HUMAN SERVICES AGENCIES IN DISASTER

Help human services agencies help your constituents by ensuring ongoing communication and coordination with your emergency management agency. These agencies provide incredible benefit at disaster services centers such as Multi-Agency Resource Centers (MARC) and Disaster Recovery Centers (DRCs). MARCs and DRCs are one stop shop locations where disaster survivors can go to access services to help in their recovery such as replacement documents, help from voluntary organizations, available financial assistance, and other social services all in one place.

Human services agencies provide services related to:

- Aging
- Autism
- Behavioral health
- Children and youth
- Housing
- Intellectual disabilities
- Mental health
- Substance use disorder
- Veterans
- Others

INTERVENTIONS REDUCE THE IMPACT OF TRAUMA FROM DISASTER

A single mother of four attended a Tropical Storm Debby Multi Agency Resource Center in Potter County. Several days after the flooding, she was visibly still shaken, describing water flowing through her trailer and reaching the upper cabinets in her kitchen. The man who was killed in the flooding? Her neighbor who was attempting to rescue a trapped dog.

Disasters commonly place undue hardship and stress on survivors who may experience a host of emotions and psychological impacts. This trauma can have lasting adverse effects on a survivor's functioning and mental, physical, social, emotional, or spiritual well-being, according to the Substance Abuse and Mental Health Services Administration (SAMHSA).

Emergency Behavioral Health (EBH) Teams help survivors cope with these normal reactions to disaster events by providing psychological first aid. After Tropical Storm Debby, Tioga County sent an EBH Team into the field, supported by the Pennsylvania Department of Human Services. This team provided comfort, linkage to supportive services, and a listening ear often reducing the incidence of long-standing impact from trauma on the survivor.

FEWER RESOURCES, GREATER BARRIERS

It's no secret that disasters disproportionately impact those who live in poverty. Affordable housing is often located in areas prone to repetitive flooding or other hazards. Fewer financial resources mean fewer options as survivors try to recover. It's much harder for folks to get back on their feet when they can't afford to repair or replace their home or stuff, let alone a hotel, or the time off work to run around town replacing essential documents and applying for disaster assistance.

Poverty and disability are also inextricably linked, thus the disaster impacted population is likely to have a greater number of individuals with a disability or access and functional needs than the overall population may suggest. The Pennsylvania Department of Human Services has a Functional Assessment Service Team (FAST) that can help in times of disaster. FAST is a small team of disability experts trained to utilize their skills in a disaster setting such as a Multi-Agency Resource Center or shelter. FAST helps ensure disaster services are accessible for all. Additionally, FAST determine what disability related needs a disaster survivor

has and works with responder on site to meet those needs.

Community action agencies and disability service providers are essential partners in disaster recovery and across all phases of the emergency management lifecycle. They are already established as a trusted messenger to the individuals and families who may need extra assistance to fully recover from a disaster. Communities must leverage these existing relationships to help impacted populations.

A CALL TO ACTION: BUILD RESILIENCY AT HOME

1. PLAY MATCHMAKER & INVOLVE THE WHOLE COMMUNITY.

Connect your human services agencies, disability service providers, and social service agencies with your emergency management agency if they are not already collaborators. Entities should engage in all phases of preparing for, mitigating, responding to, and recovering from disasters.

2. PROVIDE FOR EMERGENCY BEHAVIORAL HEALTH SERVICES.

Ensure your county or joinder has a functioning EBH Team that can provide psychological first aid after a disaster.

3. GET HELP BUILDING THE BRIDGE.

If your human services agencies, disability providers, and social service agencies are new to working with emergency management the Pennsylvania Department of Human Services (PADHS) can help build that bridge. Contact PADHS at RA-PWDISASTERHS@pa.gov.

Read more about disaster human services in Pennsylvania at www.dhs.pa.gov/MassCare.



IRMC Mountains Behavioral Health

Inspiring Hope for Mental Health Care in Our Community

An overview of the Indiana Regional Medical Center

Annie Rizzo, Director, Marketing & Community Relations, Indiana Regional Medical Center
Tammy Calderone, Administrator, Armstrong-Indiana Behavioral and Developmental Health Program
Kami Anderson, Executive Director, Armstrong-Indiana- Clarion Drug and Alcohol Commission

Mental health care has become an increasingly urgent priority across the nation, particularly in rural communities where access to specialized services can be limited. In Indiana County, an initiative is addressing these critical needs head-on. IRMC Mountains Behavioral Health is poised to transform the way the community approaches mental health, offering integrated, accessible care for individuals of all ages.

THE ORIGIN OF IRMC MOUNTAINS BEHAVIORAL HEALTH

The vision for IRMC Mountains Behavioral Health, which broke ground in June 2023, began with a clear goal: to offer high-quality, coordinated mental health care locally. The new 31,000-square-foot facility will provide forty-four beds for inpatient care, offering

a comprehensive approach to treating adolescents, adults, and geriatric patients. This expansion is especially significant as it helps alleviate the need to transport patients outside of the county for treatment, something that had been a major barrier to care in the past.

The decision to build the facility came after years of data collection and working with the Armstrong/Indiana behavioral health program and stakeholders to recognize the critical need for local care. Behavioral health is consistently the number one transfer from most Emergency Departments throughout the region, including the Emergency Department at Indiana Regional Medical Center (IRMC). The lack of local mental health beds had previously forced individuals to leave their communities for treatment, creating unnecessary delays in care and exacerbating the stigma often associated with

seeking mental health services. In 2023 alone, 371 county residents had to be served in thirty-one inpatient facilities located throughout Western and Central Pennsylvania as well as Ohio.

Over a ten-year period, the wait time for a psychiatric patient at IRMC Emergency Department to locate a psychiatric inpatient bed increased from 1.5 hours in 2009 to over 11 hours or more in 2023. The longest length of stay in the emergency department was 20.6 days and there were thirteen patients who spent over 7 days in the emergency department.

"IRMC Mountains Behavioral Health is not just a new facility; it is a lifeline for our community. Our goal is to ensure that mental health care is accessible to everyone, especially in rural areas where services have often been out of reach," stated Steve Wolfe, IRMC President & CEO. "By providing

integrated care locally, we are breaking down the barriers to treatment and offering hope to individuals of all ages. This project represents a crucial step forward in addressing the mental health needs of our region, and we are proud to lead this initiative for a healthier, stronger community."

BUILDING STRONG LOCAL AND REGIONAL SUPPORT

Creating a facility of this magnitude requires not just vision, but collaboration and support from local and regional partners like Senator Joe Pittman, Representative Jim Struzzi, Representative Guy Reschenthaler, and the Indiana County Commissioners. IRMC also worked alongside these behavioral health partners to bring this project to fruition, including the Armstrong-Indiana Behavioral and Developmental Health Program

(AI-BDHP), Armstrong-Indiana-Clarion Drug and Alcohol Commission (AICDAC), and Southwest Behavioral Health Management (SBHM).

Since 2000, when the Department of Human Services (DHS) mandated that all counties establish a structure for managing the Medicaid behavioral health funds, Armstrong and Indiana Counties have been part of what is commonly referred to as the Southwest Six (SW6). The counties of Armstrong, Indiana, Butler, Lawrence, Washington, and Westmoreland worked together to form Southwest Behavioral Health Management. The mental health administrators and the drug and alcohol or Single County Authority (SCA) Directors, for the six counties, make up the Board of Directors for the SBHM. Locally, this includes the Administrator for AI-BDHP, Tammy Calderone, and the Executive Director for AICDAC, Kami Anderson.

Through an intergovernmental agreement with all the county commissioners, SBHM holds one contract with DHS for all six counties to manage the HealthChoices Medicaid funds. This model allows the counties to maintain local control for networks, program development and access to reinvestment funds. The SBHM Board of Directors recognized the significant impact the IRMC psychiatric inpatient facility would have on the region and supported the use of reinvestment dollars for this project.

This coalition and their financial support played a key role in securing the funding necessary for the facility's construction, which primarily came from the regional SW6 reinvestment funds along with federal, state, and private donations.

Because of the ongoing engagement with our local legislators,

Representative Jim Struzzi (R-Indiana) was acutely aware of the Emergency Room Boarding issues that had been impacting the Emergency Department. As a result, Rep. Struzzi sponsored

“House Resolution 268 of 2019 which directed the Joint State Government Commission to appoint an advisory committee to conduct an assessment of the Commonwealth’s current behavioral health needs and the impact that the behavioral health care system’s capacity has on hospital emergency departments and patient health. In other words, the advisory committee studied the practice known as psychiatric boarding—where in people with behavioral health needs are maintained in hospital emergency departments while awaiting care in more appropriate settings. We are pleased to release Behavioral Health Care System Capacity in Pennsylvania and Its Impact on Hospital Emergency Departments and Patient Health.” JOINT STATE GOVERNMENT COMMISSION Report issued July 2020

This Joint Commission report not only acknowledged what we were seeing locally but brought attention to the insufficiencies of the behavioral health system identified across the state.

IMPACT ON THE COMMUNITY

The creation of IRMC Mountains Behavioral Health promises to have a lasting impact on the community. The facility’s expanded capacity for treating adolescents, adults, and seniors will significantly improve local access to mental health care. This is particularly important in a

region where behavioral health patients, as noted previously, are often transported to facilities outside the county, leaving families and caregivers with the added burden of long-distance travel.

By providing services locally, IRMC Mountains Behavioral Health is helping to overcome one of the biggest barriers to mental health care: accessibility. The facility will offer a variety of services and will serve as an integrated hub where patients can receive comprehensive treatment from a team of healthcare professionals. This collaborative care model ensures that patients are treated with an emphasis on long-term wellness and recovery.

The new facility is also set to address some of the region’s most pressing public health challenges. Given the prevalence of drug addiction and the lack of primary care providers in the service area, IRMC Mountains Behavioral Health is not just focused on treating mental health issues, but also helping to break the cycle of substance abuse and other health disparities. The ability to treat these issues in a more coordinated, local setting will help improve outcomes and reduce the burden on emergency services.

A few of the local innovative substance abuse programs taking place at IRMC and developed through the Armstrong-Indiana-Clarion Drug and Alcohol Commission include the ARMOT warm hand-off program, 24/7 hotline, and the placement of Naloxone Vending Machines outside of the emergency department and two IRMC locations.

Started in 2015, the Addiction Recovery Mobile Outreach Team (ARMOT) consists of a case manager and a certified recovery specialist (CRS) who are located at the Indiana Regional Medical Center to provide recovery support and warm handoffs to treatment for patients who have substance use disorders. The Certified Recovery Specialist is a person in long-term recovery that has been trained and certified by the PA Certification Board to provide recovery support. When a patient is screened for a substance use disorder and agrees to a referral to the ARMOT team, the case manager will perform a level of care assessment for treatment and the CRS will provide recovery support as needed. The case manager will then coordinate a warm handoff for the patient from the hospital to the treatment center. Of the patients who accepted a referral to the ARMOT team, 93% of those patients entered treatment after being released from IRMC.

In 2017, the Armstrong-Indiana-Clarion Drug and Alcohol Commission began a hotline service where their staff rotate on call shifts 24 hour/7 days a week to assist the hospital with treatment access, such as bed searches and transportation to treatment facilities, when the ARMOT team is not available. Recovery Support by the on-call CRS is also available for patients needing those services.

In June 2023, the Armstrong-Indiana-Clarion Drug and Alcohol Commission (AICDAC) and IRMC partnered to increase the availability of Naloxone and drug testing strips for people in Indiana County. AICDAC purchased outdoor

Naloxone Vending Machines that were placed outside of the Emergency Room, and at IRMC at Chestnut Ridge in Blairsville, and the Mahoning Medical Center in Marion Center.

The vending machines are manufactured by A&M Equipment and are programmed to dispense free Naloxone Kits and drug testing kits. Each Narcan (naloxone) kit contains two doses of Narcan nasal spray, instructions for use, and information on how to access treatment for a substance use disorder. Drug testing kits for fentanyl and Xylazine are also available.

Indiana County had 43 Fatal Drug Overdose Deaths in 2022, and Fentanyl was present in 84% of them. Many street drugs, such as heroin, cocaine, and methamphetamines are now laced with fentanyl, as well as pills marketed on the internet claiming to be pharmacy opioids, such as Percocet, Vicodin, or Oxycontin.

It is important to note that in January 2023, Pennsylvania passed a law to allow for the use of Drug Testing Strips to reduce overdose deaths and decrease the number of people that are exposed to Fentanyl. Act 111 was authored by Representative Jim Struzzi and amends the Controlled Substance, Drug, Device and Cosmetic Act of 1972 to no longer define fentanyl or Xylazine test strips as drug paraphernalia. Under the new law, people in Pennsylvania who buy or carry drug testing strips will no longer face potential criminal charges for possession of drug paraphernalia. Act 111 was passed by the PA House of Representatives and the PA Senate with unanimous support.

SUSTAINABILITY AND WORKFORCE DEVELOPMENT

Indiana University of Pennsylvania and IRMC signed a clinical training affiliation agreement in September 2024 for students in IUP’s proposed college of osteopathic medicine. The long-time relationship between IUP and IRMC has been very beneficial to not only the hospital and IUP but also to the community for the economic and program development impact. There are only three colleges of osteopathic medicine in Pennsylvania, all at private universities; IUP’s proposed college of osteopathic medicine would be the only college of osteopathic medicine at a public university.

During the signing event, Senator Joe Pittman, Senate Majority Leader, said, “IUP and IRMC are building a strong partnership that is serving as a catalyst for change

and will have tremendous positive impact on rural healthcare not just locally, but for Pennsylvania and beyond, from the commonwealth’s perspective, I will continue to stand ready to assist this endeavor in any way possible.”

“IUP and IRMC are united in a shared commitment to advancing the health and wellness of the community,” IUP President Michael Driscoll said. “Establishing a college of osteopathic medicine at IUP—as a university with deep roots in education and nationally recognized for its research expertise—in a community with an outstanding rural hospital like IRMC with a commitment to serving as a teaching hospital, is a perfect fit.”

The partnership between these two entities will be vitally important for training healthcare professionals and hopefully retaining them to live and work in our community in the future.





BEST PRACTICES FOR EXPANDING MENTAL HEALTH SERVICES

The success of IRMC Mountains Behavioral Health offers valuable insights for other counties and regions that are looking to expand mental health services. Key best practices include:

1. Collaboration Across Sectors

IRMC worked with local and regional partners to develop a strong, unified approach to addressing the region's mental health challenges. Building these types of coalitions can help ensure the long-term sustainability of similar projects.

2. Engagement of Elected Officials

Securing legislative support is crucial. The involvement of local elected officials, like the Indiana County Commissioners, Senator Pittman and Representative Struzzi, helped generate funding and political will for the project. Keeping local representatives educated about issues and engaged in ongoing meetings helps representatives advocate for mental health and substance abuse services and can significantly increase the likelihood of success.

3. Meeting Unique Local Needs

Understanding the specific health-care needs of the community—such as limited access to primary care, high rates of substance abuse, and a reliance on emergency departments for mental health services—was key in designing a facility that would have the greatest impact. Tailoring the facility's services to meet these unique needs helps ensure its relevance and effectiveness.

4. Focusing on Accessibility

By providing care close to home, IRMC Mountains Behavioral Health reduces barriers to treatment, making it easier for patients to access the services they need. The facility's Indiana location is especially important in a region where residents often face transportation challenges.

5. Sustainability and Long-Term Planning

The success of this project did not just rely on initial funding. Ongoing planning for the sustainability of the facility is a critical component, ensuring that it can continue to serve the community long into the future.

A BRIGHT FUTURE AHEAD

As IRMC Mountains Behavioral Health opens its doors, it will undoubtedly play a pivotal role in improving mental health care across Indiana County and beyond. The project is a testament to what can be accomplished when health-care providers, local officials, and community partners come together to address a pressing need.

This facility stands as a model for other communities striving to meet their mental health care needs. With ongoing support from elected officials, local organizations, and healthcare professionals, IRMC Mountains Behavioral Health will continue to offer critical care to residents and improve outcomes for those struggling with mental health and substance use issues.

The journey of IRMC Mountains Behavioral Health is just beginning, but its impact will be felt for years to come—ensuring that mental health care is accessible, effective, and integrated for every member of the community. 🍷



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Real Life Impacts



How County Mental Health Services Make a Difference

Pennsylvania county mental health services are a diverse collection of resources provided by counties to ensure the health and well-being of our residents. These critical services help maintain a better quality of life for all individuals across the Commonwealth. In the three stories below, we see how county mental health services can greatly impact those in our community. These stories are shared with each individual's permission.

CJ

CJ is a Certified Peer Specialist in Montgomery County, whose story highlights what happens when a person receives the right support to find their path and experience recovery. For CJ, that support was the combination of 24/7 residential care at a Community Rehabilitation Residence (CRR), community outpatient services, and a temporary rental subsidy.

CJ struggled with his mental health and was unable to live independently and carve out his niche in the community. That began to change in the spring of 2023 when he moved into a CRR, a residential program funded by Mental Health Base dollars within the Human Services Block Grant. CRRs are not available through insurance coverage and only exist because the County dedicates precious base dollars to keep them open. This level of care was developed in response to the downsizing of the State Hospital system, with the goal of providing time-limited residential support and preventing the need for longer-term placements. CRR services are temporary and focus on helping people learn the skills to manage their mental health needs, find work, engage in fulfilling social relationships, and ultimately live independently in their communities.

That is exactly the support CJ found at the CRR. He describes regaining a sense of community with "loving care" and quickly making friends, even starting a book

club. The impact of those relationships in building CJ's confidence, giving him space to practice the interactions necessary for success out in the community, and the hope it inspired in him, cannot be overstated.

In addition to 24/7 support, the CRR ensured CJ had the opportunity to participate in therapy, psychiatry and case management through another mental health agency. These clinical services are funded by Behavioral HealthChoices when a person is enrolled in Medicaid, and are funded by Mental Health Base dollars for individuals without insurance.

By December 2024, CJ was in such a good place in his own mental health recovery that he was inspired to find a way to help others. He completed a 2-week intensive Certified Peer Specialist (CPS) course. CJ excelled at the training and was joyously surrounded by family during the graduation ceremony. CJ will use this professional certification to work in the public mental health system and help others. CPS services have been found to be extremely effective and reduce the need for costlier levels of care.

CJ will soon move from the 24/7 residential facility and into his own apartment with the help of a medium-term rental subsidy for individuals with mental health challenges transitioning out of CRRs. This is possible through the use of Mental Health Base and Community Health Choices reinvestment funds. These

subsidies are temporary in nature, providing a supportive bridge while CJ establishes regular income through employment.

CJ is appreciative of the services he received noting: "It's been an exciting journey, and I know I couldn't have done it without the support I received from such people and my loving family. Programs like these made a great difference in my life and I am extremely thankful."

EZRI

Ezri struggled as a youth with mental illness, repeated hospitalizations, and even a residential placement. She felt "broken." Then she became involved with the Youth Advisory Board at Voice and Vision. Through listening, education, mentoring, support, and behavioral health systems advocacy, Voice and Vision encourages peers to thrive and live fulfilling lives. Being around other youth who were "kindred spirits" helped Ezri see that the difficulties she experienced could be worth something, that she was worth something.

Ezri's time at Voice and Vision led to a job at a child serving agency as a peer mentor. While there, she realized she was lacking in skills needed for future growth. This led her to apply to College Plus, a program of Voice and Vision and funded through Mental Health Base funding. Because the Program pays for tuition, books, fees, and group support for the first semester for individuals with mental illness, Ezri felt she could give college a try. Ezri explained that the peer support aspect was important, too, because she stated when you have mental illness as a child, you miss a lot and no one talks to you about college. So, you become afraid to ask questions because you don't want to appear stupid. With the College Plus peer support, she states she always had someone "safe" to turn to and this relieved her anxiety. It was empowering also to be with others with mental illness going to college. After her first semester, her confidence increased. She learned to reach out to the Accessibility Office and ask her professors for accommodations when needed.

After successfully completing her Associate's degree at Bucks County Community College, Ezri continued her education and graduated from

Delaware Valley University in May 2024 with a Master of Arts in Counseling Psychology with a focus on social justice. Congrats Ezri!!!!

QPR

Question Persuade Refer (QPR) is a suicide prevention training that is designed for the lay person. Through the utilization of Mental Health Base funding, Bucks County started an initiative in 2016, training 20 people to be trainers in QPR with the goal to deliver the training throughout Bucks County. In 2022, a middle school teacher, Dr. Jim, received the instructor training, as he saw its value firsthand. He had a goal in mind to train not only his students, but parents in the community as well. He shares that he used the tools/skills learned to train in three different settings. He shares that he applied QPR in his personal life, with a colleague, and as a professor, with one of his students. Knowing the importance of saving lives by applying QPR, he was a catalyst in advocating for more QPR facilitators within his own school district. In 2024, he wrote a grant to The Bucks County Suicide Prevention Task Force for funding to provide 12 new school staff members to be trained as QPR facilitators. With more trainers trained, QPR may be offered widely within local schools to even more staff and students alike. As a Pastor, teacher, professor, and community member, Jim continues to inspire others to talk more openly about mental health and suicide with his knowledge, personal stories, and expertise. In Bucks County alone, 1,669 individuals were trained in QPR in FY 23/24. 📌



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- EMS Reorganization and System Implementation

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PASSIVE VS. ACTIVE Investing

Submitted By **CS McKee**

Traders Magazine interviewed a famous investor in 2014 and asked: "Given the proliferation of indexes, how should advisors weigh various index funds against each other?"

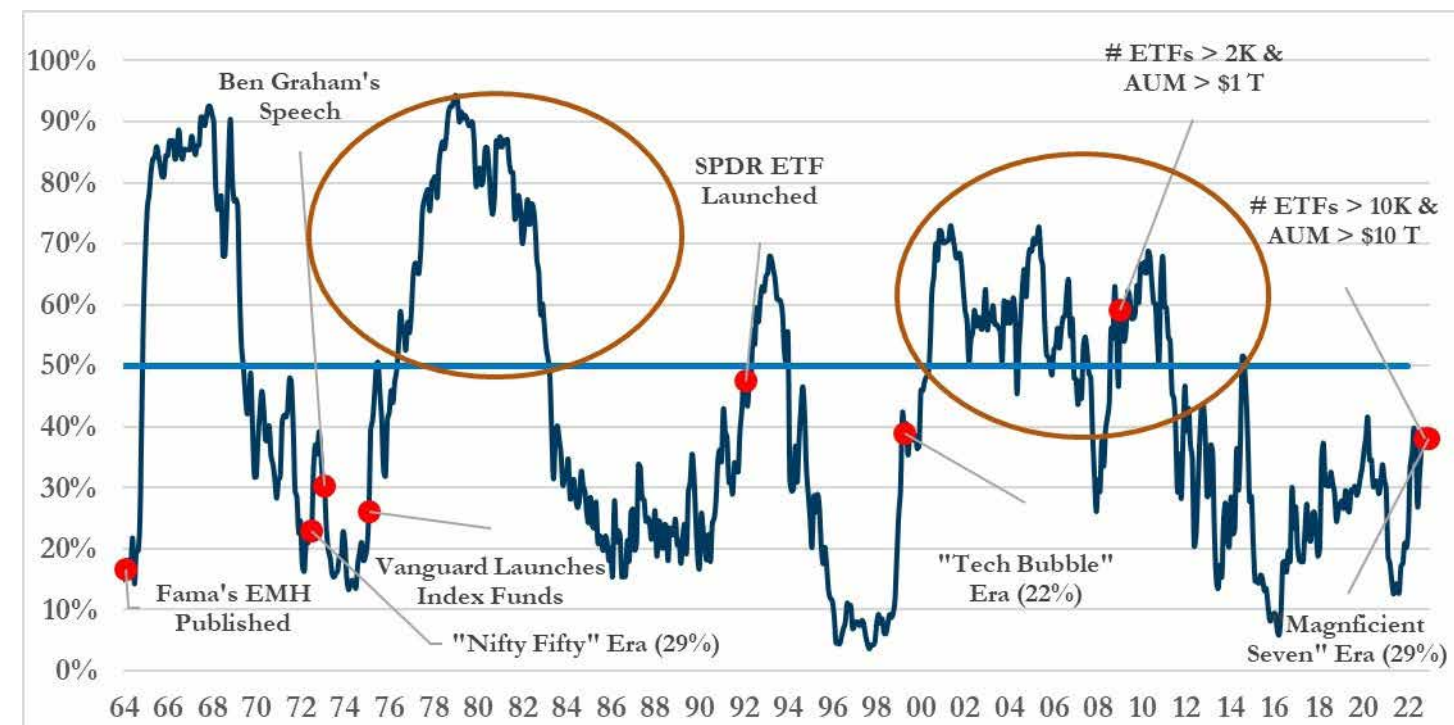
The Response "I think it's gone much too far. Most of them are not worth the powder to blow them to hell." - John Bogle (Founder of Vanguard)

This article does not assess the merits of passive or active investing but analyzes their performance over six decades while exploring the ETF industry's evolution and potential hidden risks in passive investing.

ACTIVE VS. PASSIVE PERFORMANCE

Vanguard's introduction of the low-cost index fund in 1976 intensified the passive versus active debate. The launch of the first Exchange Traded Fund (ETF) in 1993 to track the S&P 500 marked another evolution, with ETFs now often serving as a proxy for passive investing.

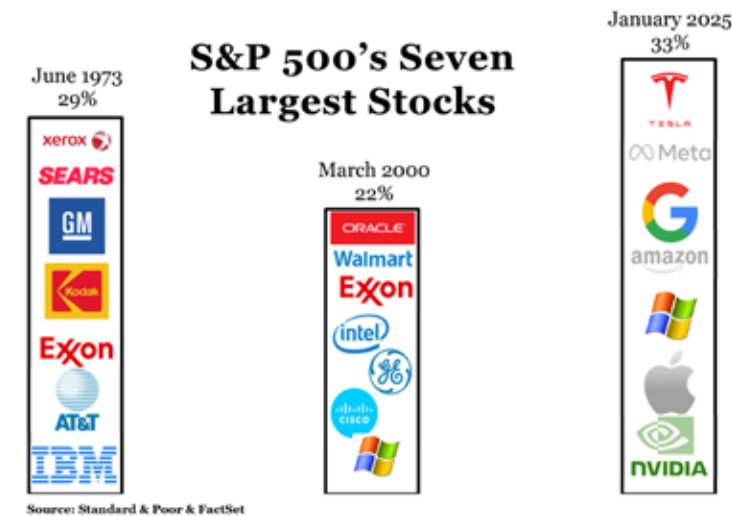
Active fund performance follows a cyclical pattern relative to index funds (see chart below). Historical data (using the CRSP Survivor-Bias-Free US Mutual Fund Database) suggests active management performs better when market concentration is lower. While active funds have struggled net of fees in recent years, history suggests active underperformance is cyclical, not permanent.



The chart's horizontal line (and above) indicates the effectiveness of active management and below 50% suggests otherwise. Source: Data from the CRSP database, Foundry Partners LLC, FactSet; as of 09/30/23

CONCENTRATION RISK IN INDEX FUNDS

The S&P 500, a passive investing benchmark, has seen increasing concentration risk. As of January 2025, the top seven stocks constitute 33% of market capitalization but only 11% of sales and 24% of net income, surpassing previous boom periods such as the late '90s tech bubble and early '70s Nifty 50 era.



Small-cap indices also present structural risks. Many contain unprofitable and lower-quality companies, while some small-cap ETFs include larger stocks and/or pose liquidity risks.

Whether it's the "Magnificent 7" in the S&P 500 or negative earners in small-cap indices, such concentration can create feedback loops, where fund flows amplify volatility. Historically, active management has tended to outperform following periods of extreme index concentration.

THE PASSIVE PERCEPTION FALLACY

Amidst the predominant use of various indices as passive investment vehicles, a pertinent question arises: do they still adhere to the original concept of passive investing and the broader market definition envisioned during its inception? William Sharpe, in his work "The Arithmetic of Active Management," defined passive investing as an approach where an investor "always holds every security from the market, with each represented in the same manner as in the market". In contrast, active investing was defined as "one who is not passive" and "differs from that of the passive managers at some or all times". The crucial term here is "the market", and what that represents.

Over time, this definition has evolved. Now, any infrequently traded investment tracking an index is consid-

ered passive, regardless of the underlying stocks within that index. We posit, this shift has created a passive perception fallacy. Some indices (and their respective "passive" vehicles) subtly guide investors toward certain market positions.

THE RISKS OF PASSIVE INVESTING

Ben Graham, considered the father of value investing, acknowledged the need for a passive vehicle as early as 1974, amidst a period of lackluster performance for active management. Four decades later, and the aforementioned John Bogle of Vanguard, became increasingly vocal against certain aspects of the ETF complex. He told investors to "beware" of some ETFs, warning that in cases they are little more than a marketing innovation.

While it's our position that passive investing has undeniable benefits—cost efficiency, broad exposure, and simplicity—it is not risk-free. The assumption that index funds are always the safest choice ignores key market dynamics:

- Market Distortions: Excessive flows into index funds can create concentration risks and artificial demand for the largest positions.
- Liquidity Risks: Some ETFs become so large where some positions can be difficult to sell in volatile markets.
- Cyclical Performance: Active management has historically outperformed following extreme periods of market concentration.

Public fiduciaries face a challenging investment landscape. While passive investing remains a valuable tool, it is not a one-size-fits-all solution. Both approaches play a role, where skilled active managers or a hybrid approach may be a better solution in helping navigate turbulent markets. ▼

The S&P 500 Index, or Standard & Poor's 500 Index, is a market-capitalization-weighted index of 500 leading publicly traded companies in the US. It is not possible to invest directly in an index. Nothing in this brochure/article represents a recommendation to buy or sell any particular security. Investors should consult their own investment adviser to determine whether a particular investment or strategy is appropriate for their specific situation. Translated from "Active & Passive Investing: Navigating Cycles and Hidden Risks (2024) by Mark Roach, Mario Tufano-CFA, Patrick Coleman." Translation by Jason Thon. For more information, contact Shane Nickolich at snickolich@csmkckee.com or 724-972-2223, or visit www.csmckee.com.



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