

# QUARTERLY report



## special edition

Volume 20, No. 4 | 2018



Left to Right: PRO•A Executive Director, William Stauffer and Keynote Speaker, David Mactas

By William Stauffer, PRO•A, Executive Director and Patricia Baranowski, PRO•A, Recovery and Resiliency Coordinator

## PRO•A

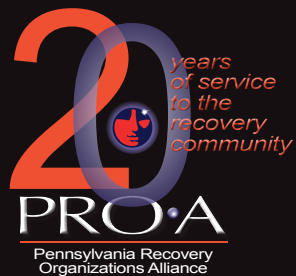
### *Celebrates 20 Years of Service to Pennsylvania!*

Pennsylvania Recovery Organizations Alliance (PRO•A) was proud to celebrate 20 years of service to the recovery community of Pennsylvania. Recovery leaders and advocates from around the state gathered together for a sold-out celebration on November 7th in Harrisburg! We were honored to have Mr. David Mactas, the first Director of the Center for Substance Abuse Treatment, as our keynote speaker.

Mr. Mactas, who was instrumental in establishing the funding for recovery community organizations nationwide, shared his experiences and insights on early treatment, recovery efforts in the United States and the pervasive role of stigma on our community. We are deeply grateful to him for his contribution to the establishment of recovery community organizations across the nation and for sharing his insight and perspective with us on our 20th Anniversary.

*Thank you, Mr. Mactas!*

*Continued on page 12*



# THE 5 YEAR MILESTONE CONCLUSION



By Marianna Horowitz, PRO•A, Program Coordinator

This is the final installment of *The 5 Year Milestone* continuation story. In this issue of the PRO•A Quarterly Report newsletter, we will focus on the need to provide quality recovery housing opportunities through several articles on the impact of recovery housing. Recovery housing opportunities are predictors of better outcomes in recovery and abstinence, employment, decreased criminal justice system involvement, and are an important component to our substance use disorder care service system.



Left to Right: Marianna Horowitz and Devin Reaves, at the NASW PA annual conference

*Continued on page 4*

WORKING  
TOGETHER  
TO MAKE  
"RECOVERY  
VOICES COUNT"  
IN PENNSYLVANIA



# QUARTERLY report

Volume 20, No. 4 | 2018

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# NCD AF- UPDATE

Jeanne Cribari Pastor, Board Member, NCD AF

The Natalie Cribari Drug Awareness Fund (NCD AF) has been very busy hosting and coordinating several events, and we are preparing for several more upcoming events. On November 7th we hosted a community Narcan training event at the American Legion Post 272, training participants in the proper technique for administering Narcan. Thank you to Jason Campbell, Chief of the South-Central EMS, for your instruction at this event. Participants were also given a free NCD AF kit that included a dose of Narcan, a quick reference instruction card, gloves and a zip-lock bag to dispose the used applicator. Based on our very positive turnout we are looking to continue this type of community service in the future, adding CPR training as well. Look for future announcements on our website [www.ncdaf.org](http://www.ncdaf.org) or on Facebook at <https://www.facebook.com/NCD AF>.

We also hosted, and our parents participated, in the 22nd annual Worldwide Candlelight Vigil for the 4th year, coordinating with the Compassionate Friends Camp Hill chapter. This was held on December 9th at Saint Mark's Lutheran Church on Londonderry Road. This vigil celebrated the lives of children the world has lost for any reason. For more information on our candlelight vigils, please contact Linda Thomas at [ltthomas@ncdaf.org](mailto:ltthomas@ncdaf.org).

Plans have started for our Fifth Annual Fund Raiser. These have always been very successful and provide for us the funds to continue our support of those in need. We have given out many scholarships, 75+ to-date, to those who are in need of detoxification, rehabilitation or recovery, and do not have the financial ability at this difficult time in their lives. NCD AF works with the Recovery community and coordinates payment on their behalf. There are many other initiatives that we organize and support. Please see our website, on the “What We Do” page, for more information on all our activities.

The 5th Annual event is planned for Monday, April 29th, 2019 at the Best Western Premier, East Park Drive, Harrisburg, and the theme is Recovery Full Circle. As we did last year, we will be awarding a college scholarship to an individual in recovery that is looking to further their education. More information is to come.

We are in discussion with several organizations to host a motorcycle ride fundraiser and awareness event. Plans are targeted for spring or summer 2019. Again, we will provide more information as soon as it is available.

As always, we, the parents, remain committed to raising awareness and helping individuals and families in need of support, whether it be financial or emotional. We have had many success stories and are so very proud of them for their courage to change. Please visit our website at [www.NCD AF.org](http://www.NCD AF.org) for more information, or email me at [jpastor@ncdaf.org](mailto:jpastor@ncdaf.org).



To NCD AF, PRO•A extends a special thank you on behalf of the loved ones of those whose lives will be saved through your generous contribution of the Narcan Kits at our 20-year event.  
**A LIFE SAVED CAN BE RECOVERY GAINED!**

# Battle Won!



## **THE BATTLE WAS WON, BUT THERE WILL BE FURTHER FIELD ACTION AHEAD! OUR PRIVACY RIGHTS ARE CIVIL RIGHTS!**

Confidentiality rights are fundamentally important to our community. This information differs from other medical records that do not relate to illegal use of drugs and highly sensitive trauma. When we seek help for a substance use condition, we must be able to do so without having to worry that our information may be used to discriminate against us or that we could risk legal jeopardy by seeking help. Congress recognized in 1972 that the treatment of substance use conditions has unique concerns, in relation to all other health care, and enacted strong protections to protect us and to improve access to life-saving treatment and recovery services.

Since then, there has been a steady drum beat among groups who want unfettered access to this information. History shows us that if our information ends up in the wrong hands, the information would be used to further marginalize us. We would have little ability to determine who violated our rights and few options to seek legal remedies regarding the release of information about illegal drug use.

Over the summer, HR 6082 was passed through the US House of Representatives. Its principle function was to eliminate the requirement to obtain our consent to release 42 CFR Part II related information to flow electronically into the healthcare system to a myriad of vendors and business partners. It is important to note that the primary barrier to properly accessing our information is the fundamental and pervasive lack of understanding within our healthcare on how 42 CFR Part II applies. Advocacy work by Faces & Voices of Recovery, The Legal Action Center of New York, and other partners nationally resulted in that bill not making it into the final Opioid Package (HR 6) that was signed into law by the President on October 24th.

While we have won an important battle – the war against our right of self-determination wages on. The Electronic records companies and other lobbying groups have a direct financial interest in obtaining our information and are spending millions of dollars to compel our elected officials to change the law and eliminate our right of consent. The primary sponsor has vowed to reintroduce the bill, and there is movement within the Administration to make further regulatory changes to address the needs of these lobbying groups.

In the words of Dr. H. Westley Clark, JD, MD and former Director of SAMHSA, “unfortunately, many legislators in the nation’s capital are ignoring the voices of people directly affected by people with substance use disorders. The Overdose Prevention and Patient Safety Act (H.R. 6082) is an example of a “solution” that represents the interests of corporate entities and those who would profit off the information about people in treatment or recovery.”

PRO•A is grateful to all of our community that has contacted Congress, signed petitions, and worked to educate elected officials about the importance of Substance Use Disorder privacy rights. Please stay engaged, our rights depend on our community staying active. Please regularly check our website section on confidentiality rights located here: <http://pro-a.org/42-cfr-part-2/>

Thank you,

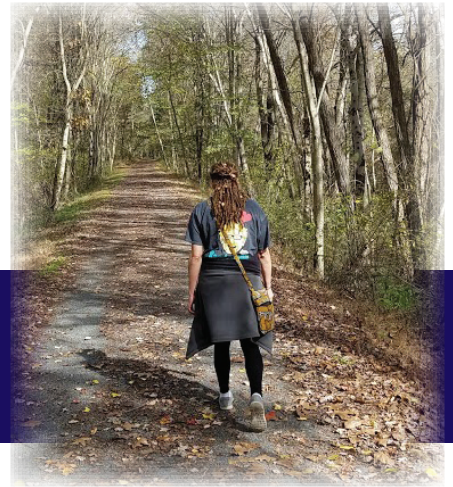
William Stauffer, LSW, Executive Director  
Pennsylvania Recovery Organizations Alliance

THE 5 YEAR  
MILESTONE CONCLUSION

My journey into recovery, and the amazing opportunities afforded to me in my recovery, began in recovery residences and sober living situations. After completing an in-patient treatment program, I spent approximately two and a half years in some form of a recovery residence. According to Faces and Voices of Recovery (FAVOR), recovery residences are sober, safe and healthy living environments that promote recovery from alcohol, other drug use and associated problems. “They offer peer-to-peer recovery support with some providing professionally delivered clinical services aimed at promoting abstinence-based, long-term recovery.” Studies indicate better outcomes for individuals who access sober living houses.<sup>1 2</sup>

*It would remiss of me if I did not state that having a safe, drug-free living situation to return home to, is too frequently assumed to be true for those exiting treatment.* Upon exiting treatment, I was not asked if I had a drug-free home to return to. Additionally, my needs in my early recovery process are much like those many others experience in their early recovery process. I had no driver's license or means to drive, no birth certificate or social security card, I was unemployed, had pending criminal charges, and I needed to access basic medical care for eye exams, dental work, a physical, and other conditions. I was also under physiological stress from discontinuing drug use and emotional distress from confronting the wreckage of my substance use and being separated from my children.

# More Than JUST A HOME...



I began my journey in a Licensed Drug and Alcohol Halfway House, which the Department of Drug and Alcohol Programs (DDAP) defines as “providing a home like atmosphere within the local community, is accessible to public transportation, and provides opportunities for independent growth and responsible community living. Mutual self help, assistance in economic and social adjustment, integration of activities of daily living and development of a sound recovery program are components of halfway houses.” At the halfway house, I was provided not just a safe place to stay but also a support team that helped me with transportation, scheduling, locating, and accessing resources. This allowed me to focus more on my therapeutic needs for recovering. I had individual one-on-one sessions and group sessions with a staff counselor, other groups that focused on how to respond in healthier manners and learned to be responsible in our residential community though contributing with household chores. I completed packets of paperwork, aimed to help me utilize introspection to heal and grow, and connected to the larger community through a requirement to volunteer in the community. By the time I completed this program, I had a recovery-based social support network; a job; a community network, built from my volunteering; identification documents; my healthcare and psychological needs were being met; and I had a foundation in recovery.

One I completed the half-way house program, I entered a recovery house. SB 446, signed into effect in December 2017, defines a “Drug and alcohol recovery house” as “housing for individuals recovering from drug or alcohol addiction, which provides those individuals with a safe and supportive drug and alcohol-free environment that may include peer support and other recovery support services.” I spent nearly 15 months at this recovery house, and ultimately became the live-in house manager. This program included an orientation phase; had requirements to attend recovery meetings, recovery 101 meetings, life skills meetings, and house meetings; seek and find employment; complete chores; and follow house rules to include curfews, signing in and out, meeting weekly with a Certified Recovery Specialist, and completing random urine screens. Through this program, I strengthened my recovery base, reinforced my life-style change, continued to build my community network through volunteering, learned to be a leader as a house manager, and began my college career.

When I completed this program, I moved into a sober living situation with my best friend who was also in recovery. Social supports and peer supports are vital to the recovery process.<sup>3</sup> There's relatability found in common goals and the support of each other's recovery. Having access to recovery residences provided these supports which were conducive to my obtaining and maintaining recovery. The various recovery residences helped to meet my needs, which varied from stage to stage of my recovery. They also helped to eliminate the stress of needing to become fully independent immediately upon entering recovery, offered additional structure and accountability, and gave me a safe place to stay that didn't allow substance or alcohol use in the home.

When we talk about recovery, stigma, and barriers for individuals who have a substance or alcohol use disorder, we know there is a need for help finding employment, and barriers frequently include criminal history and transportation. But, in the midst of what feels like a crisis, relearning the basics of cleaning and practicing good hygiene; accessing medical care, locating doctors, understanding insurance, and scheduling doctors' appointments; and accessing services that require identification, with no identification, are the minute details that are very stressful and overwhelming to an individual trying to learn how to live again and rebuild their life. Recovery residences provide additional support to navigate these difficulties, create a peer-to-peer foundation to encourage one another, and pave the way to building a foundation in recovery.

This is my story, and it is why I wholeheartedly agree on our agency's stance for the need to offer access "to stable, supportive and affordable transitional and long-term housing." This issue of the PRO•A Quarterly Report Newsletter concludes our continuation piece on the Retooling Care to Meet Our Needs— A Recovery Community Vision for a Five-Year Focused Substance Use Disorder Treatment and Recovery Care System. We thank you for following along, and I thank you for reading my personal experience along the way. So much of what we envision has personally affected my recovery process, and others' as well. Please feel free to access this document in your journey to advocate for recovery at <http://pro-a.org/wp-content/uploads/2018/06/0-PRO-A-vision-for-a-five-year-focused-recovery-care-system-62118.pdf>.

<sup>1</sup> Polcin, D. L., Korcha, R., Bond, J., & Galloway, G. (2010). What did we learn from our study on sober living houses and where do we go from here?. *Journal of psychoactive drugs*, 42(4), 425-33.

<sup>2</sup> Polcin, D. L., & Henderson, D. M. (2008). A clean and sober place to live: philosophy, structure, and purported therapeutic factors in sober living houses. *Journal of psychoactive drugs*, 40(2), 153-9.

<sup>3</sup> Tracy, K., & Wallace, S. P. (2016). Benefits of peer support groups in the treatment of addiction. *Substance abuse and rehabilitation*, 7, 143-154. doi:10.2147/SAR.S81535

# More Than JUST A HOME...

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# DDAP Recovery House

In December 2017, the General Assembly passed and Governor Wolf approved Senate Bill 446. This new legislation directs the Department of Drug and Alcohol Programs (DDAP) to license or certify drug and alcohol recovery houses that (1) receive referrals from state agencies or state-funded facilities or (2) receive federal or state funding.

DDAP will make regulatory changes for the licensure or certification of drug and alcohol recovery houses on or before June 17, 2020. Once the regulatory changes are in place, only licensed or certified drug and alcohol recovery houses will:

- Be eligible to receive federal or state funding to deliver drug and alcohol recovery housing services, and
- Be eligible to receive referrals of individuals whose treatment is funded with federal or state funding.
- Also, state or county courts must give first consideration to facilities that are licensed or certified when making residential recommendations for individuals under their supervision.

## How to stay informed:

If you currently operate a recovery house or are thinking about operating a recovery house that will receive state funds or referrals, you may view this information in its original context at <https://www.ddap.pa.gov/Pages/Recovery-House-Licensing.aspx>.

Filling out the form will allow DDAP to keep you up to date on key information related to the upcoming regulatory action on recovery houses. It does not bind individuals to a course of action, nor does it start the application process for licensure or certification.

## A Home for Recovery



Angelica Fiore

By Angelica Fiore, Chief Operating Officer, RASE Project

Some people may take a warm safe home for granted, I never have. I have struggled with addiction since taking my first drink at the age of 12. Both of my parents have the disease of addiction, and I saw throughout my childhood the horrors of active addiction. My dad's alcoholism caused my parents to divorce, and my mom was a single mom of three who suffered from mental health issues and addiction. Life was inconsistent and chaotic; I never knew what any given day would bring. There was always an emptiness inside me that I thought I would never be able to fill. My parents supported drug and alcohol use, and I was constantly surrounded by it. Eventually, I started using heroin with my mother and turned to a life of crime and selling drugs to support myself.

Fortunately for me, I was not a very good criminal. I had my first serious arrest at nineteen, for manufacturing and distributing drugs. The judge was lenient and sent me to rehab; after three weeks I was sent back home - back to chaos, needles and spoons scattered everywhere. Needless to say, I used. I had promised myself I would never go back to jail again; the pain I went through detoxing on a cold cement floor in prison was unbearable and something I never wanted to do again. I didn't sell drugs again but what I did do was far worse. I didn't use for almost a whole day, and I was really feeling it. So that particular day, I committed armed robbery and was arrested. I knew I was going to go away for a long time, and part of me was happy the pain would finally stop. I stayed in prison for eighteen months; when finally, the judge asked to see me, he basically told me he was aware of my family history but that didn't excuse my actions. He suggested I find somewhere else to live, far away from my family. The stipulations were that it had to be a structured environment, and I had to stay there for the remainder of my sentence and complete the program. I was ecstatic to hear that I would be getting out of prison, and I was ready to try to have a "normal" life. I stayed in prison for two more months; my counselor from the prison helped as much as she could but most halfway houses and recovery houses wouldn't take a violent offender. I was losing all hope; until one day, I finally heard back from a house in Harrisburg called the RASE House. They accepted me, and I was released into their care February 15th, 2011. At that point I had been battling my active addiction for well over 10 years. I was 21 years old.

Immediately upon entering the RASE House, I was given a sense of purpose and security. I was given my own bed with clean sheets, towels, and toiletries. A Coordinator met with me, heard my life story, hugged me, and told me there's another way to live. I was told all the rules; no drug use, attend a 12-step meeting daily, sign-in and sign-out, go to recovery 101 classes, life skills classes, do your chores, and clean your room. I finally felt like someone cared what I did; I was commended when I did a nice job on my chore, and I felt like sisters with girls in the house. Suddenly I had been given one of the greatest gifts, renewed self-worth. In short, I had been given a reason to live, a reason for hope. I was proud of myself, all due to the new way of life the RASE House taught me, I'll be honest, no one had ever taught me how to wash my clothes; or dust correctly; or have time management; or that my feelings were valid and important, those were all things I learned at the RASE house. I completed the RASE House October 15th, 2012. I now have over seven years in recovery, own my own home and car, and hold a job in the drug and alcohol field, where I get to give back every day. I am and always will be eternally grateful to The RASE House for giving me my much-needed start in recovery.

Having a safe and stable environment to relocate to, afforded me the opportunity to thrive. For once in my life I was able to focus on bettering myself. The recovery house gave me unconditional acceptance and love, something I hadn't experienced before. The structure and rules taught me to be accountable, how to find and keep a job, and how to find positive social activities, all of which are vital to maintaining recovery. Not everyone has a supportive family and home environment, if you do, consider yourself lucky. Recovery houses can benefit anyone looking to obtain recovery, but for me it was the game changer.



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**Mobilize, Educate, Advocate For Recovery**

# National Recovery Month

Prevention Works • Treatment is Effective • People Recover

## September 2018







*Left to Right: Corey McCabe of ALIVE2DAY and Patricia Baranowski, PRO•A Recovery and Resiliency Coordinator*

In the spirit of the 2018 National Recovery Month, we attended recovery month events across our state. We promoted more than 50 recovery month events through our Quarterly Report Newsletter distribution and through the statewide calendar on our agency website. Some of our highlights included: attending the DDAP recovery month event; Marianna Horowitz speaking at the Recovery Advocacy Day: Courage to Change Rally and taking the lead on Organizing the Dauphin County Recovery Day Walk; Stephanie Hastings had a blast at the York County Recovery Celebration and Overdose Awareness Day, and the Our Live's Matter Quilt was displayed throughout the month of September at the Harrisburg State Capitol.

William Stauffer participated in a panel discussion to educate on the importance of our patient privacy (see page 17), and Patricia Baranowski and Corey McCabe represented our agency at the PRO-ACT recovery walk.



Drug Awareness Day was held August 18, 2018. Our goal in planning the event was to breakdown stigma and show the community that people can and will recover when presented with opportunities and resources. Our event featured a variety of speakers:

PRO•A Executive Director, Bill Stauffer, spoke on the importance of access to services; Executive Director of PA Harm Reduction Coalition, Devin Reaves, spoke on recovery advocacy and the benefits of harm reduction; Marketing Rep for Summit BHC, Samantha Osterloff, shared her experience, strength and hope, stressing that treatment works and recovery is possible; and Founder of The Skook Recovers, Travis Snyder, shared his inspirational message of hope emphasizing that together we become stronger.

The event was a huge success with over 2,000 people in attendance. We offered free food, beverages, and had more than 20 resources available. We distributed 120 free doses of Narcan and offered Narcan training. The second annual Drug Awareness Day event is scheduled for August 17, 2019.



Left to Right: William Staffer and Corey McCabe

Left to Right: Devin Reaves and Corey McCabe

## Drug Awareness Day

# Corey McCabe, ALIVE 2DAY

## Community Liver Alliance – Training Treating Hepatitis C in a Primary Care Setting CME Training Education for Providers

The Community Liver Alliance, a statewide 501c.3, has worked for more than three years to advocate to do away with treatment barriers for Pennsylvania Medicaid. It was a long process, but we were able to remove fibrosis score and sobriety restrictions, and on January 1, 2018 the Pennsylvania Department of Human Services Office of Medical Assistance eliminated the specialty provider treatment requirement and opened treatment to primary care providers.

In response to that change, the Community Liver Alliance developed a training program with continuing medical education credits for primary care providers and their staff on how to treat hepatitis C patients. The new treatments are safe and remarkably easy to use, and published data make clear that these regimens can be used effectively in the primary care setting. The goal of this course module is to help clinicians and other service providers understand the local and regional picture of HCV, understand HCV screening recommendations, current treatment options, the diagnosis, how to treat HCV patients, and specific issues with vulnerable populations especially people who inject drugs and as it relates to the opioid use disorder epidemic.

Expanding hepatitis C treatment to non-specialty settings allows greater opportunity to reach and treat special populations, such as intravenous drug users, patients in federally qualified health centers, incarcerated and otherwise marginalized urban and rural populations. Awareness of America's opioid epidemic has grown in recent years as a result of the grim statistics detailing deaths due to drug overdose. The Centers for Disease Control and Prevention (CDC) reports that opioid overdose deaths quadrupled between 1999 and 2015, with more than 33,000 deaths in 2015. Equally sobering, although not as readily recognized by the general public, are the increases in hepatitis C that have occurred concurrent with the injection of opioids. An analysis by scientists at the CDC revealed increases in the number of new HCV infections over a ten-year period (2004—2014). These researchers concluded that national increases in acute HCV infections are directly related to the nation's opioid epidemic and associated increases in injection drug use.

The Community Liver Alliance PCP HCV Treatment Training Program is unique because it is an in-person training on the management of patients with chronic hepatitis C infection in primary care. The Program emphasizes the key clinical components of pre-treatment evaluation, monitoring during therapy, and post-treatment follow-up for patients with hepatitis C. It clarifies when to treat and when to refer to an experienced care provider, such as when treating co-infected patients, patients with advanced liver and/or renal disease or when treatment may affect decisions about transplant. Our program is FREE and includes CMEs, a toolkit and resources. For more information, please contact Suzanna Masartis, Executive Director, Community Liver Alliance at 412-400-9343 or [suzanna@communityliveralliance.org](mailto:suzanna@communityliveralliance.org).



# ONDCP Visits the RASE Project



*By Denise Holden, Founder & CEO, RASE Project*

When the President's choice for Drug Czar/Deputy Director of The Office of National Drug Control Policy (ONDCP), Jim Carroll, contacted Faces and Voices of Recovery about visiting a Recovery Community Organization, they recommended he visit the RASE Project. The RASE Project was extremely honored by this request and on November 19, 2018 Presidential Appointee and ONDCP Deputy Director, Jim Carroll, and three of his staff members joined Pennsylvania's Secretary of Drug and Alcohol Programs, Jennifer Smith, and one of her staff members to visit the RASE Project's Recovery Center located at 131 East Orange Street in Lancaster, Pennsylvania. While there, they met with RASE employees Kristin Varner, Angelica Fiore-Torres, Sandy Fisher and Michelle Olmeda to learn about what we do at RASE Project and tour our historic facility.

The meeting began with introductions, a brief history of RASE, and descriptions of various RASE Programs. Deputy Director Carroll asked questions regarding the shift in substance use. He was curious to know if we've noticed a shift from heroin to methamphetamines because they have noticed a shift on the national level. Deputy Director Carroll also wanted to know about funding sources for Recovery Support Services and wondered what services needed support.

Deputy Director Carroll's main objective was to speak with participants who have received services from the RASE Project. He spent a great deal of time speaking with the participants who were present at the Recovery Center. He explained the purpose of his visit was to find out what resources are available to service recipients and how to support them with the limited funds that have been allocated.

Participants shared their experience in RASE Services and stated there is a need for more programs like RASE. Much time was spent discussing the barriers and challenges to a person seeking or already in recovery. Deputy Director Carroll expressed interest in the job seeking process for those with felonies and how to creatively refrain from answering those questions during a job interview or when filling out an application. The participants also shared their stories and opinions on Medication Assisted Recovery/Treatment. At one-point Deputy Director Carroll stated, "When a policy is implemented, I pray that it will help people." Deputy Director Carroll was genuinely interested in what the participants had to say and was very gracious, wishing all participants well on their journeys.

With limited time remaining a quick tour of the facility was given. Deputy Director Carroll liked the building and our services and thanked us for our time. It was truly the experience of a lifetime for the RASE Project employees and our participants. We are extremely grateful to Faces and Voices of Recovery as well as to Deputy Director Carroll for this opportunity!



*Shown from left to right, Michelle Olmeda, Jennifer Smith, Jim Carroll, Angelica Fiore, Kristin Varner, Sandy Fisher*

*Left to right, ONDCP Deputy Director Jim Carroll with Participant*



*highlights*

*20 Years of Service to Pennsylvania!*



Members of our original Board, our first Executive Director and many of our friends and allies came together to celebrate this important milestone in our history. Speakers Dona Dmitrovic and Mike Harle talked about the roots of treatment coming from the recovery community, and William Stauffer shared about our work over the last two decades and how we have provided a unifying voice of our community, while serving to educate the public and policy makers about recovery and the benefits of recovery across our great state. We remembered our history and challenged attendees to work towards a future in which we establish a long-term treatment and recovery care system that meets the needs of our communities across Pennsylvania.

We also honored an individual and a service organization as Champions of Service to the recovery community. These awards came out of our SAMHSA Grant steering committee as we identified the need to keep recovery a central focus of our care systems. We celebrate that the central unifying force for recovery has always been one person with a substance or alcohol use condition talking with another.

**Institution/Organization 2018 Champion of Service Award  
Dauphin County Department of Drug and Alcohol**

**Individual Champion of Service Award  
Brandy Rohrbaugh – RASE Project York / Adams Counties**

To learn more about the Champion of Service Award or to nominate a Certified Recovery Specialist engaged in providing warm hand off services or an organization that is doing an exemplary job of connecting our community to help, please visit our web site at: <http://pro-a.org/champion-of-service-award/>

We also celebrated significant contributions to our care system by awarding our first Executive Director, Dona Dmitrovic, with the 2018 PRO•A Ambassador of Recovery Award for her work advocating for our community across Pennsylvania and beyond. And, we awarded Mike Harle with the PRO•A Lifetime Service to the Recovery Community Award for his work to serve the treatment of the recovery community of Pennsylvania and beyond for over 40 years. We are grateful for their dedicated service to our community!

The event was in part a call to action to reframe our care system to one that meets the needs of our community and to focus new leaders on the lessons of the past and the challenges we will face together moving forward. While we may have a long way to go, we know that the system we are seeking to develop is evidenced based, community supported, and will strengthen recovery for individuals and families in the ways we need to heal our communities. We envision a care system that supports long-term recovery for individuals, families and communities and will work towards that future. To learn more about our five-year care system vision, visit our web site here: <http://pro-a.org/wp-content/uploads/2018/06/0-PRO-A-vision-for-a-five-year-focused-recovery-care-system-62118.pdf>

**WITHOUT YOU, WE COULD NOT POSSIBLY DO THE WORK WE DO!  
THANK YOU FOR YOUR STEADFAST SUPPORT FOR OUR MISSION!**

Please consider donating in the amount of \$20 or more to honor our 20 years of service and to support our mission moving forward!  
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# CHAMPION of Service Award Recipients

*By Stephanie Hastings, Recovery Service Community Coordinator, PRO•A*

## FIRST TWO PRO•A CHAMPION OF SERVICE RECIPIENTS ARE CROWNED!

*In April of 2018, we launched the PRO•A Champion of Service Award to bring recognition for exceptional service in a Warm Hand-Off, connecting an individual and their family with Drug & Alcohol treatment and resources as well as service system engagement.*

*In November of 2018, we were honored to present the first two recipients with their Champion of Service Awards at our 20-Years of Service Celebration event.*

The first Organization/Institution selected as a Champion of Service was Dauphin County Drug & Alcohol Services. Dauphin County was nominated and selected as a Champion of Service for their tireless work to facilitate getting individuals into treatment and assisting those in need in navigating the D&A service system to get into treatment, 24 hours a day, 7 days a week. From the director to the case managers, they approach each person in need as though they are receiving specialized attention, regardless of the number of times they have helped someone previously. Their Warm Hand-Off program came during Cheryl Dondero's time as the Director of Dauphin County D&A as she worked with Randie Yeager, Dauphin Co. Human Service Director, and Commissioner George Hartwick to develop the program. John Sponeybarger has been the key person in the implementation of Dauphin County's Warm Hand-Off, without John's personal commitment and dedication, the program would not have gotten off the ground nor seen the success it has. It was due to his relationships in the hospitals, with Dauphin County probation, Dauphin County prison, and especially in the community that made it work. We are very glad that the community, which Dauphin County serves, has recognized the hard-work and dedication of the staff in their Warm Hand-Off program and nominated them to be a PRO•A Champion of Service!

# Award Winners



Dona Dmitrovic 2018 PRO•A Ambassador of Recovery Award



John Sponeybarger on Behalf of Dauphin County Drug & Alcohol, PRO•A's 1st Organization-Institution Champion of Service



Mike Harle PRO•A Lifetime Service to the Recovery Community Award



Brandy Rohrbaugh CFRS-CRS Champion of Service



Congratulations to Dauphin County Drug & Alcohol for being PRO•A's 1st Organization/Institution Champion of Service!

The first CRS/CFRS selected as a Champion of Service was Brandy Rohrbaugh. Brandy is a Certified Recovery Specialist (CRS) who works as the Lead Warm Handoff Overdose Responder for the RASE Project in York and Adams Counties. She has been a part of the team since the Warm Handoff Overdose program began at RASE Project, on December 12, 2016. She started as a responder and shortly was promoted to lead status due to her expertise at working with survivors and providers. Brandy is successful in building rapport and encouraging individuals to enter into treatment. She also does a wonderful job at meeting individuals where they are, with respect and dignity. Brandy has a vast knowledge of providers and services in York and Adams Counties. She will do whatever is necessary to get someone into treatment as well as help find supports for their family to aide them through their journey. Brandy plays active role in the RASE Project's community outreach efforts by marketing all the services available through RASE and at her locations. We are so pleased that Brandy's organization and community recognizes her exemplary services in the RASE Project's Warm Handoff Program and has nominated her to be a PRO•A Champion of Service!

Congratulations to Brandy Rohrbaugh for being selected as PRO•A's 1st CRS/CFRS Champion of Service!

We were honored to present Dauphin County and Brandy Rohrbaugh the 1st two PRO•A Champion of Service Awards in recognition for their outstanding work and dedication during Warm Hand-Offs. We received many nominations for both categories – Organization/Institution and CRS/CFRS – and we appreciate each and every submission! Everyone involved plays a vital role in the success of Warm Handoff programs across the state and in saving the lives of our fellow Pennsylvanians. *This is why we are so passionate about recognizing and honoring the hard work, dedication, and exceptional service happening in Warm Handoff Programs each and every day.* We will be selecting two recipients for the Champion of Service Award each quarter, one per Organization/Institution and one per CRS/CFRS. Is there a CRS or CFRS who stands out in your mind for their work in Warm Handoffs? Did an Organization or Institution go out of their way to assist you in your time of need or do they have a reputation of doing so? *Nominate them to become a PRO•A Champion of Service, for their work in warm handoffs!* Each Champion of Service will be highlighted in PRO•A's Quarterly Report and honored with an award at end of year. The award description page and submission form can be found on our website:

[pro-a.org/champion-of-service-award](http://pro-a.org/champion-of-service-award)

If you have any questions please feel free to contact Stephanie Hastings, [s.hastings@pro-a.org](mailto:s.hastings@pro-a.org)  
**Don't wait, nominate your Champion of Service today!**



I recently had the privilege of attending the PRO•A 20th anniversary celebration. It didn't take long before I knew I was surrounded by extraordinary people, who filled the room. One of the biggest challenges we face today, is the opioid crisis. Chances are, we all know someone who has been affected by this disease. So many lives have been taken, so many have been incarcerated, and too many families have been broken. The amazing people of PRO•A are determined and extremely motivated to educate and advocate to eliminate the stigma of those who have been stricken by the disease of addiction. Years ago, if you or a loved one was suffering from addiction, it was a family secret. Today, look at us, talking out loud, educating, and offering more recovery choices for people in need.

I believe one of the most important steps to recovery is being able to connect with others who have fallen victim to addiction. These incredibly strong people in long-term recovery have a unique ability to offer treatment opportunities and hope to everyone in active addiction and their families who are desperately looking for help. Our loved ones need to know that they are not alone. Who better to help in this recovery process than the people who have already been through the journey.

As a society, we need to understand that the disease of addiction is never a person's choice. Addiction does not discriminate; it can happen to anyone at any time. This powerful disease puts a person's body through physical and mental agony. Family members are so often living with fear and the feeling of helplessness. PRO•A is changing all this bad stigma of the past to a future of hope and justice for all of us. Although there is no cure for this disease, it is treatable and can be managed. Just like lupus, MS, and other chronic illnesses, there is no cure, but they are treatable. My hope for the future is to stop the massive incarceration, the denial of timely treatment, and to challenge ourselves to rewrite the status quo regarding addiction. The face of addiction is in all of us. We need to stand together with our state, federal, and community municipalities to put an end to this crisis. Educating our youth at a young age is the key to the future.

In closing, I would like to directly address all of you who are in recovery, or on your way to recovery, and the families of loved ones with addiction. We as a society have learned so much. You're a fighter, and we know how hard you are fighting every single day. You are a person who is deserving of love, admiration, forgiveness, and so much more. You should also know how much of an inspiration you are. We know that this is an illness, not a choice, and is an everyday struggle. Continue to stay strong. Your determination and your will to live the life you want despite any hardships in your way, amazes me. I believe your support system is what gets you through life one day at a time. As a more informed society, with the widespread awareness of addiction, we our offering our hand to help you start your new life. I hope that you can read this and feel the truth and sincerity behind each word. Today lifelong recovery is not only possible but a reality.

A special thanks to Patti and Bill from PRO•A, for an eye-opening experience. You have inspired me and most of all you have given me hope. Your hard work is changing lives.

Sincerely, Audrey Hetten-Steigewalt, A proud mother of a young, incarcerated man, in recovery for 8 years 9 months and 4 days.

*Love from a Mom*

Dear PRO•A,

*I want to thank you for all the support you have provided to me as a business owner, educating employers about substance use disorder in the workplace, as past employee of Gaudenzia and the Drug Free Workplace PA program and as a person in recovery from substance use disorder. Bill Stauffer and other team members helped me grow and become strong as an individual, helped me enter into the field of drug and alcohol treatment and education, helped me grow in this career of saving lives, helped me in my pursuit of my CRS and provided valuable insight regarding the pardon process in the state of Pennsylvania. I will forever be grateful of all of your support. May you continue to contribute to the recovery community for another twenty years! God bless you!*

Best regards, Victor Parziale, President, Ernest Victor Consulting LLC

## OUR VALUED SPONSORS... thank you! thank you! thank you!





For every individual who develops a substance use disorder, there are countless family members and friends who care deeply for that individual and experience their own pain, fear, and frustration. As one of those family members, I have experienced confusion, hopelessness, and the overwhelming fear that I may lose my son as a result of his addiction.

Today, I am grateful for so many things – my own recovery from codependency, my son's recovery from his substance use disorder, and the healing and education that my entire family has received. I also am incredibly blessed to have found a new vocation as the executive director of Be a Part of the Conversation, a nonprofit organization that creates community programs that educate, raise awareness, and reduce the stigma associated with substance use, misuse and addiction.

In 2013, I learned about the training opportunity to become a Certified Recovery Specialist (CRS). I am not a person in recovery, but *at that time*, anyone with lived experience related to substance use disorders was eligible to apply. The training was terrific, and I learned a great deal, but I was left wanting to know more about family dynamics, codependency, enabling, healthy boundaries, and all the other challenges we face when we love someone with a substance use disorder.

Last November 2017, I was honored to work alongside representatives from the Pennsylvania Certification Board (PCB), PRO•A, and with other family members who have been impacted by the disease of addiction. Together, we created the content outline for a new credential – the Certified Family Recovery Specialist (CFRS). That credential was made available to the public on January 1, 2018.

# CFRS: Guiding Light for Families in Crisis

By Kim Porter, Executive Director, Be a Part of the Conversation

Here are the PCB descriptions that should illuminate the distinction between a CRS and a CFRS:

**The Certified Recovery Specialist (CRS)** credential is for drug and alcohol peers in recovery who have been trained to help others move into and through the recovery process. As a CRS, an individual accepts and agrees that his/her experience as a person in recovery from a substance use condition will be known by their colleagues, persons served, and others with whom he/she may share that they have achieved this credential.

Additionally, a CRS will follow the Code of Ethical Conduct outlined in this application. A person with lived experience must attest that he/she has personal, lived recovery experience in a continuous manner for a minimum of 18 months to be eligible for the CRS credential. See more at [https://www.pacertboard.org/sites/default/files/applications/PCB\\_CRS%20Application\\_0.pdf](https://www.pacertboard.org/sites/default/files/applications/PCB_CRS%20Application_0.pdf).

**The Certified Family Recovery Specialist (CFRS)** credential is for adults who have been directly impacted by another person's substance use disorder. The CFRS shares their lived experience with other families to provide recovery support services.

CFRSs are trained to help families move into and through the recovery process. As a CFRS, an individual accepts and agrees that his/her experience will be known by their colleagues, persons served, and others with whom he/she may share that they have achieved this credential. Additionally, a CFRS will follow the Code of Ethical Conduct. See more at [https://www.pacertboard.org/sites/default/files/PCB\\_CFRS%20Application.pdf](https://www.pacertboard.org/sites/default/files/PCB_CFRS%20Application.pdf).

With the new CFRS credential in place, there is a wonderful opportunity for family members and other loved ones to provide peer support to others who are traveling down a road that is foreign to them but is familiar to us. Much like the person with a substance use disorder, our stories are different, but so many of the challenges are relatable and create an opportunity to truly understand one another. Once we pursue our own recovery, we often find clarity, self-awareness, new resources for support, and an understanding of our new role in our loved one's journey.

It is the hope of all of us who understand the value of sharing our lived experience that employment opportunities will become available for CFRSs. Imagine you have taken your 26-year-old son to a facility for detoxification, or you are dropping him off for an Intensive Outpatient Program. Today, you might be given some reading materials about codependency, but you will most likely walk out the door filled with fear, confusion, and possibly anger and shame. And, you will feel incredibly alone. It is as if you are in the dark, desperate for answers with no idea where to turn.

Now imagine you have been introduced to a Certified Family Recovery Specialist who understands what you are going through. They understand the stigma you have faced, the sleepless nights, the arguing and pleading, the anger that results from being lied to, and the all-consuming fear that your son may not find recovery or may lose his life. Your CFRS will know where nearby support group meetings are, they can make you aware of professional resources that might benefit you, and they can guide you to find strategies for your own health and well-being. They will also help you to understand why this substance use disorder has taken the person you have loved with all your heart and changed him into someone who is unrecognizable to you. Now, in this darkness, you have a guiding light that will walk alongside you on your own journey toward recovery.

*Continued on page 18*

Some of the most valuable gifts that I have found in my own recovery are the parent support groups that have been flourishing throughout our region. In the past eight years, I have regularly attended meetings in Plymouth Meeting, Hatboro, and Malvern, but there are an ever-growing number of meetings getting started. And of course, Al-anon and Nar-anon meetings have been providing support for loved ones for years. But it is the connections, the comfort, and the strengthening of spirit that I see week after week in these judgment-free environments that I truly believe has drastically improved so many of our lives! How wonderful it would be to find trained CFRS's in these rooms who could provide that added level of awareness, confidential and ethical practices, and knowledge of resources.

There are countless ways that CFRS's can be utilized in the future, but we need to build a roster of trained family members and loved ones. Perhaps you are someone who would like to be among the first to provide this much-needed peer support. I am so pleased that Be a Part of the Conversation has been working with PRO•A to provide the full 60-hour training series to become a CFRS. Our series have been taking place on Saturdays from 9 am to 4 pm at the Center for Families at 101 Phoenixville Pike, Malvern, PA 19355 and concluded December 8, 2018.



## Panel Discussion: Patient Privacy Rights

### PRO•A continues to Champion Patient Privacy Rights at University of the Sciences Forum

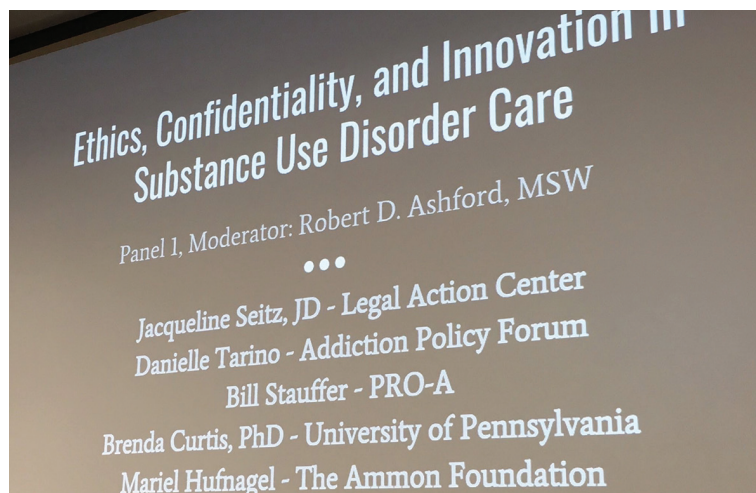
PRO•A Executive Director, William Stauffer, was part of a panel discussion highlighting the importance of protecting substance use patient privacy rights on September 20th, in Philadelphia, at the University of the Sciences. The Substance Use Disorders Institute at University of the Sciences hosted a one-day event bringing together an array of professionals who play an important role in supporting long-term recovery from opioid and other substance use disorders and included a focus on this critically important topic.

The panel included Jacqueline Seitz, JD, of the Legal Action Center of New York; Danielle Tarino, VP of Health Information Technology for the Addiction Policy Forum; Dr. Brenda Curtis, Assistant Professor of Psychology in Psychiatry at The Hospital of The University of Pennsylvania; and Mariel Hufnagel of the Ammon Foundation. The panel was moderated by Robert Ashford. Panelists emphasized that information gained to assist a person with a substance use condition includes highly sensitive information and includes the illegal use of drugs that can be misused, shared improperly or stolen, and that this can lead to discrimination and reduce access to life-saving care due to fear of having our information used to harm us.

PRO•A Executive Director, William Stauffer, emphasized that “reform” of current federal regulation 42 CFR Part 2 is not about better care – the issue is about predictive analytics and risk assessment. Current laws allow for a modified community rating, allowing those with, or at risk for SUD, to be able to buy and afford health insurance. The existing campaign against 42 CFR Part 2 is designed to eliminate the protections against financial sanctions directed towards those with or at risk for SUDs and will open us up to an array of sanctions and discrimination.

PRO•A has been active in protecting these rights along with partners including Faces & Voices of Recovery, the Legal Action Center of New York, and other groups interested in safeguarding our rights. There are ongoing efforts to reduce our rights to privacy.

To learn more, please visit our website at <http://pro-a.org/42-cfr-part-2/>.



# Gaudenzia *Annual* 26th Women & Children's Conference

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Elizabeth Smart



Candy Finnigan

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Never Giving Up."* Candy Finnigan, *Interventionist on the A&E Show Intervention.*

The 26th Annual Conference will enable participants to promote better outcomes for women and children exposed to High Risk Pregnancy, HIV/AIDS, Substance Abuse, Adolescent and Adult Trauma, Human Trafficking, Opioid and Other Emerging Drug Trends and other healthcare related issues.

Rev. Joel Jakubowski, MA, CRS, CIP, CADC, Executive Director of ROFM; A Panel of Experts Addressing Human Trafficking moderated by Shea M. Rhodes, Esq., Director and Co-Founder of Villanova Law Institute; Katrina Thoma, CRNP, RN, MSN, Director of Medical Services at Sadler Health, Elizabeth Sinclair, Director of Research, Office of Research and Public Affairs, Treatment Advocacy Center.

Congratulations to all who have worked tirelessly and dedicated their time and talents to make the Recovery Movement a Reality. We look forward to working together to achieve many more milestones!



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