

Pay for Performance (P4P):  
Residential Rural Capacity Expansion Plan

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DATE:

**Instructions:**

Interested providers must collaborate with the Administrative Entity(ies) (AE) to develop a Rural Capacity Expansion Plan. Providers committed to expanding residential service capacity in counties designated as rural will work with the applicable AE(s) to develop a plan to offer additional residential services to individuals registered in rural counties who are seeking residential services in rural counties. Providers must respond to all elements in the template. **If your agency plans to implement multiple locations, please clearly identify the associated HCBS services and other community resources for each location.** For additional information please see the [26-27 P4P Announcement, Attachment](#), and [Rural Capacity Guide](#).

Providers will then submit all documents including the completed template to [RA-PWODPPBC@pa.gov](mailto:RA-PWODPPBC@pa.gov).

**Required Elements:**

**Name of Provider:**

**MPI:**

**Letters of Support from all applicable AEs included with this plan**

Type of Service(s) Being Developed

Address(es) of Proposed Service Location(s)

**MCI(s) of Individual(s) to Receive Services**

**Development Timeframes (including target APC dates)**

**Eligible Rural Counties (Select all that apply):**

- |                                     |                                      |   |
|-------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Adams      | <input type="checkbox"/> Armstrong   | <input type="checkbox"/> Bedford        |
| <input type="checkbox"/> Blair      | <input type="checkbox"/> Bradford    | <input type="checkbox"/> Butler         |
| <input type="checkbox"/> Cambria    | <input type="checkbox"/> Cameron     | <input type="checkbox"/> Carbon         |
| <input type="checkbox"/> Centre     | <input type="checkbox"/> Clarion     | <input type="checkbox"/> Clearfield     |
| <input type="checkbox"/> Clinton    | <input type="checkbox"/> Columbia    | <input type="checkbox"/> Crawford       |
| <input type="checkbox"/> Elk        | <input type="checkbox"/> Fayette     | <input type="checkbox"/> Forest         |
| <input type="checkbox"/> Franklin   | <input type="checkbox"/> Fulton      | <input type="checkbox"/> Green          |
| <input type="checkbox"/> Huntington | <input type="checkbox"/> Indiana     | <input type="checkbox"/> Jefferson      |
| <input type="checkbox"/> Juniata    | <input type="checkbox"/> Lawrence    | <input type="checkbox"/> Lycoming       |
| <input type="checkbox"/> McKean     | <input type="checkbox"/> Mercer      | <input type="checkbox"/> Mifflin        |
| <input type="checkbox"/> Monroe     | <input type="checkbox"/> Montour     | <input type="checkbox"/> Northumberland |
| <input type="checkbox"/> Perry      | <input type="checkbox"/> Pike        | <input type="checkbox"/> Potter         |
| <input type="checkbox"/> Schuylkill | <input type="checkbox"/> Snyder      | <input type="checkbox"/> Somerset       |
| <input type="checkbox"/> Sullivan   | <input type="checkbox"/> Susquehanna | <input type="checkbox"/> Tioga          |
| <input type="checkbox"/> Union      | <input type="checkbox"/> Venango     | <input type="checkbox"/> Warren         |
| <input type="checkbox"/> Washington | <input type="checkbox"/> Wayne       | <input type="checkbox"/> Wyoming        |

## Plan Details

**Describe the plan for workforce recruitment, retention, and supervision**

**Describe the plan for transportation**

**Describe the plan for employment and/or community participation**

**Describe additional non-residential services (Mark N/A if not applicable)**

**Describe the plan to access clinical supports**

**Access to Physical and Behavioral Health Services**

**Plan for Technology / Remote Supports**

**Technology Incentive Plan (Optional)**

- Agency is submitting a Technology Incentive Plan

**Describe how electronic health records will be incorporated into the expanded residential location(s)**

**Describe how remote supports and/or technologies that promote wellness, safety, and independence will be incorporated into the expanded residential location(s)**

**Describe how technology that supports supervision, communication, and training between on-site staff, supervisors, and administration will be incorporated into the expanded residential location(s)**

