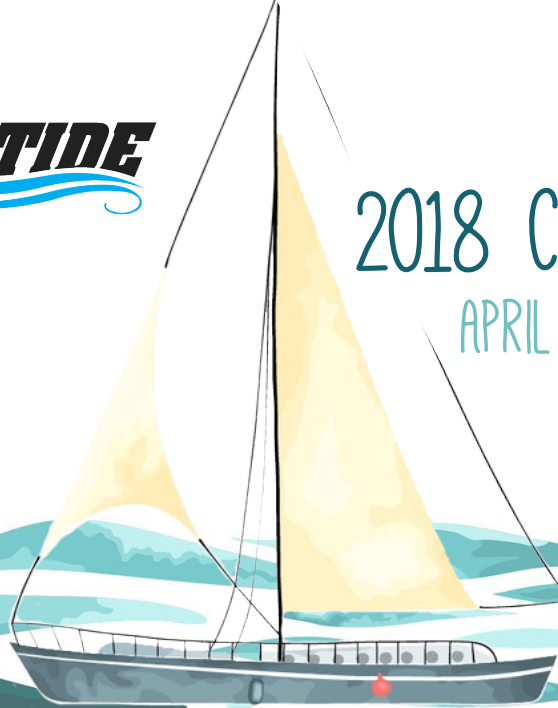




NC TIDE

2018 CONFERENCE

APRIL 23-25, 2018



WILMINGTON, NC

APRIL 23-25, 2018

HILTON WILMINGTON RIVERSIDE
301 N Water Street | Wilmington, NC

The North Carolina Training, Instruction, Development and Education (NC TIDE) Committee is a non-profit training organization for the behavioral healthcare industry. With their first conference in 1975, established in 1992 as a non-profit agency, and most recently renamed NC TIDE in 2011, NC TIDE has successfully completed over 81 conferences and trained thousands of individuals in the behavioral healthcare industry. NC TIDE in the past has sponsored two training conferences each year, one in the spring in Wilmington, NC and one in the fall in Asheville, NC. NC TIDE will only be offering the conference in the Spring as they continue to grow. NC TIDE officers and committee members are all professionals in the behavioral health care industry who volunteer their time to carry forward the mission of the organization. Their organization is dedicated to continued improvement and provides information, training, and education to all in our field of work.

Currently NC TIDE addresses information in the areas of:

- Finance and Reimbursement
- Managed Care Directors
- MIS Information Management and Technology
- Medical Records and Confidentiality
- Quality Management
- Clinical Practices
- Practice Management
- Regulatory Compliance
- Customer Service
- Consumer Affairs
- Community Collaboration and Outreach
- CFAC Members (Consumer and Family Advisory Council)

AUDIENCE

LME/MCO, human resources, care managers/coordinators, administrators, practice managers, mental health professionals including substance use counselors, social workers, psychologists, marriage and family therapists, school counselors, peer support specialists, intellectual/developmental disability providers, CFAC members, consumers and family members, and other professionals and individuals interested in this subject.

Jointly provided by



With the support of



REGISTER FOR INDIVIDUAL DAYS OR ALL THREE!

ONLINE REGISTRATION

View information about individual days on the following pages

Early Conference Check-In for Pre-Registered Participants on Sunday, April 22 from 5-7pm at the Hilton Wilmington Riverside.

EARLY REGISTRATION FEES THROUGH APRIL 16TH:

FEE	\$153 (Per day)
FULL CONFERENCE	\$233 (All 3 days)
ONSITE REGISTRATION	\$275 (All 3 days)
GROUP (see special)	
<i>(Five or more from same agency, registering and paying at same time. Must use paper registration form.)</i>	

All conference attendees receive a complimentary membership, included in fee

NO PHOTOGRAPHY or AUDIO or VIDEORECORDING of sessions without written permission from the speaker and/or prior approval of the NC TIDE Executive Committee.

OBJECTIVES

Upon completion of this educational activity, the participant will be able to:

- Identify vital updates in NC state policy enabling participants to navigate the future of healthcare for MH/SU/IDD providers
- Utilize current trends and best practice models in business and provider services
- Apply learned skills in business administration, clinical practice and leadership focusing on practice change

CREDITS



NBCC: MAHEC and NC TIDE are cosponsors of this program. This cosponsorship has been approved by NBCC. MAHEC is an NBCC Approved Continuing Education Provider, ACEP No. 5514. The ACEP is solely responsible for this program, including the awarding of NBCC Credit. Full session attendance is required to receive credit. 14.25 hours maximum.

NCSAPPB (C): NC Substance Abuse Professional Practice Board Event Approval #18-211-C (Combination of Substance Abuse Specific and General Skill Building) for 14.25 Hours. Full session attendance is required to receive credit.

Psychologist: MAHEC is recognized by the North Carolina Psychology Board as an approved Provider of Category A Continuing Education for North Carolina Licensed Psychologists. Approved for **14.25 hours Category A**. Full session attendance is required to receive credit.

CEU: MAHEC designates this continuing education activity as meeting the criteria for **1.4 CEUs** as established by the National Task Force on the Continuing Education Unit. Full session attendance is required to receive CEUs.

Contact Hours: MAHEC designates this continuing education activity as meeting the criteria for **14.25 Contact Hours**. Full session attendance is required to receive credit.

BUY 4, GET 1 FREE SPECIAL

For every **4 FULL** conference registrations for this conference, your agency can receive a **5th FULL conference registration FREE!** The group rate is \$233 each for 4 FULL conference registrations with no fee for the 5th registration. This rate expires on April 16th. After April 16th, 4 FULL Conference registrations can be purchased at the rate of \$258 each with no fee for the 5th registration. (One day registrations do not count toward the total registered.) Please register using the last page of the brochure for this discounted rate. All registrations must be received at the same time. Groups **MUST** fax, scan/email, or snail mail registration forms to MAHEC.

LOCATION

Hilton Wilmington Riverside
301 N Water St | Wilmington, NC

IMPORTANT HOTEL INFORMATION:

ROOM INFORMATION:

A block of 150 rooms has been reserved at the Hilton and 50 rooms are blocked at Riverside Suites at a rate of \$135.00 per room plus tax on a first come first reserved basis. Please note the tax for Williamsburg is currently thirteen percent (13%).

RESERVATION:

Office hours are Monday through Friday between 8:00am and 5:00pm. To book your reservation, call:

Hilton Wilmington Riverside

Local: (910) 763-5900
Toll Free: 1-888-445-8667
Group Code "TID"

Riverview Suites

106 N. Water St
Local: (910) 772-9988
Toll Free: 1-888-324-8170

Be sure to mention that you are with NC TIDE to obtain this rate. The reservation cut off date is 3/21/18. After the cut-off date, no reservations will be accepted at the special group rate.

ONLINE RESERVATION:

All online reservations can be made through our website at NC TIDE Hilton page or by calling the Hilton Worldwide toll free number at 1-800-HILTONS (1-800-445-8667). Please mention Group Code TID to get our special rates.

GUEST ROOM CHECK-IN / CHECK-OUT TIME:

Check-in Time: 3:00 PM. Check-out Time: 12:00 PM

Have a Question?

CE Planner:
Scott Melton, M. Div.
MAHEC
828-257-4402
scott.melton@mahec.net

Special Services: 828-348-3619

For Logistics Questions Contact:
Marilyn Brothers, RHIA
NC TIDE
919-740-9435
marilynbrothers@earthlink.net

For Registration Questions Contact:

MAHEC: 828-257-4475 | Fax Registration: 828-257-4768
Online Registration: www.mahec.net | Email: registration@mahec.net

REGISTRATION: 8:00am - 3:00pm

PROGRAM: 8:30am - 4:30pm

8:00-8:30am CONTINENTAL BREAKFAST WITH EXHIBITORS

8:30-9:00am WELCOME (*Business Meeting*)

9:00-10:00am OPENING PLENARY

The "Art" of Community Integration

Susan Dlouhy and Patty Mitchell offer a vibrant, timely message delivered with enthusiasm and passion. Current challenges to provide more community integrated services are addressed through innovative approaches and actual experiences by this team. Susan and Patty have worked with organizations across the United States, helping to transform their services using visual art as the medium for change! The Creative Abundance Model (CAM) is shared as the framework for transforming traditional programs into community-centric spaces. The CAM is also offered as a context for leadership and social change within any organization. Patty and Susan demonstrate responsive programming techniques that build on the talents and interests of individuals being served, staff and a community's unique culture. The process intentionally encourages an entire organization to move forward as a whole with clearly identified goals and a unifying invitation of participation throughout the process. As a professional artist, Patty has taken many photographs, which are shared to help the audience to emotionally connect with the presentation.

Susan Dlouhy, MA - Rehabilitation Counseling

10:00-10:15am BREAK (*Exhibitor Visitation*)

10:15-11:45am BREAKOUT SESSIONS (*Choose one*)

A1: NC 1115 Waiver Update: Preparing for the Shift in NC Medicaid

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

This session will provide an update on the status of North Carolina's 1115 Waiver and how Medicaid stakeholders need to prepare for the implementation scheduled for mid-2019.

- Describe how NC Medicaid stakeholders can strategically prepare for the implementation of the State's 1115 Waiver.

Lanier M. Cansler, Former NC Legislator and NC Secretary of Health and Human Services | Sarah Pfau, JD, MPH

A2: Developing an In-Lieu of Service: Mobile Outreach Response Engagement Stabilization (MORES) Pilot Implementation

Partners Behavioral Health Management is currently working on implementing the MORES program (Mobile Outreach Response Engagement Stabilization). This bundled youth crisis service includes initial mobile crisis and evaluation, targeted case management and other wrap around services developed and implemented in New Jersey. The presentation would walk through the new program from initial clinical development to developing a value based reimbursement model and testing for cost neutrality.

- Program design
- Clinical consideration
- Data mining
- Rate determination
- Budget neutrality determination
- Value Added features
- Pilot testing
- Full implementation

Niels Eskelsen, MBA | Allison Gosda, MA, LPC, LPLS, MAC

A3: Management of Adolescent Self-Injurious Behavior (SIB)

This training will focus on a review of the reasons for, warning signs, myths and facts, and interventions to manage adolescent self-injurious behavior.

- Identify four myths and facts about SIB
- Identify five purposes that SIB serves
- Be able to implement 10 coping strategies and substitutes for cutting behaviors
- Identify four reasons for adolescents to stop SIB
- Identify seven techniques to intervene with family members successfully

Bob Werstein, PhD

A4: Interaction Management/Team Building

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

This session will lead participants in "transforming" a group of individuals into a cohesive team that can work together cooperatively and individually to meet their agreed upon purpose and goals. This session is designed to: improve leadership skills, minimize or prevent conflict by promoting a culture of trust, mutual respect, improve collaboration, help one recognize change, explore change and overcome personal resistance to change, manage appropriate choices in words and actions, direct situations away from possible damage and toward discovery of ideas and solutions.

- Practice working together to be more productive and successful
- Determine how to raise and resolve issues that stand in the way of accomplishing set goals

Barb Kunz, MEd

A5: How to Gain Success with a Quality Improvement Learning Collaborative

Looking for a new way to engage your staff, build collaboration with local primary care practices and demonstrate movement on the integrated care continuum? In this session, you will learn how to administer and use an integrated care assessment instrument, how to organize and lead a successful integrated care learning collaborative and how to engage your staff in learning to apply the Plan-Do-Study-Act (PDSA) quality improvement cycle. Examples from a regional learning collaborative held in late 2016 and early 2017 will be shared.

- Determine how to use an integrated care assessment instrument
- Practice using a PDSA planning worksheet
- Understand the steps in implementing a successful learning collaborative

Mark C. Medlin, MA, Lean/Six Sigma Black Belt

MONDAY CONTINUED...

11:45-1:15pm | LUNCH (on your own)

1:15-2:45pm

BREAKOUT SESSIONS (Choose one)

B1: Advancing Recovery in the Hospital: How to Utilize Peer Support Services

This session focuses on how peer supports connect the mission of Atrium Health to their role as peer support specialists. They will identify the universal four key functions of peer support and how they provide these duties in the hospital setting. Finally, they will discuss why an organization needs to engage peer support specialists in the workplace.

- Define how peers fit in to the philosophy of care in a hospital setting
- Identify specific functions peers carry out to best support individuals seeking services
- Examine the organizational role in supporting peer support specialists

Calvin Harvel, NC CPSS, North Carolina Certified Peer Support Specialist | David Boyle, NC CPSS

B2: Treating Opioid Use Disorders and the Medication Assisted Therapy (MAT) Continuum of Care

This presentation will discuss medications used in the treatment of opioid use disorder, regulatory oversight, and current NC MAT services.

- Examine the role of medications used to treat opioid use disorder
- Recognize laws and regulatory oversight of MAT and using them in a continuum of care

Smith Worth, LCSW, LCAS | Amy Morris, LPN, CSAL

B3: Creative Abundance: Engagement, Community Partnerships and Economic Opportunities

The Creative Abundance Model (CAM) is shared as a framework for transforming traditional day programs and workshops into community-centric spaces. This presentation targets professionals with a vision of becoming more community integrated, offering authentically engaging programming and introducing new income producing options. The CAM is also a pathway for organizations seeking to meet CMS regulations by discovering natural paths to community integration and economic development. Monarch NC has successfully transitioned two day/vocational programs using the CAM and will discuss their consulting experiences, outcomes achieved, challenges encountered and the positive effects of the transition. The presentation includes a visual explosion of photographic images that have been captured by professional photographer, Patty Mitchell.

- Recognize organizations across the US that are shifting their culture to integrated community spaces through the Creative Abundance Model
- Develop natural and unscripted community integration outcomes that are easily replicated
- Experience how the Creative Abundance Model can help individuals be embraced and valued as community members and how organizations can be resources for the larger community

Susan Dlouhy, MA | Patty Mitchell, MFA | Julia Augustoni, MA

B4: Using Cost Accounting to Price Alternative Payment Models

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

As we move away from fee for service reimbursement to alternative payment models, we must ensure that these new models are priced at levels that allow providers to survive financially, allow MCOs to work within their budgets, and allow consumers to get the services they need. How do you set the rates for models like bundled services, case rates and sub-capitation, etc.? Providers will have to use cost finding techniques to establish their price thresholds and determine whether a particular payment model makes sense. MCOs will have to look at providers' cost reports to determine whether proposed alternative payment models and rates are viable. We were all relieved when the state no longer required annual cost finding, but actually cost finding is more important than ever.

- Discuss the federal mandate for alternative payment models and the move away from fee for service
- Discuss the risks of alternative payment models and the importance of rate setting
- Discuss how to price alternative payment models using cost accounting
- Discuss the various types of alternative payment models

Vince Joyce, CPHIMS

2:45-3:00pm

BREAK (Exhibitor Visitation)

continued on next page

3:00-4:30pm

BREAKOUT SESSIONS *(Choose one)*

C1: Closer to Free: Receiving My Supports in My Home

In 1993 O'Brien wrote, "Supported Living is a simple concept in danger of being complicated until its power to help people with developmental disabilities gets lost." Though perhaps simple in concept, decades later, agencies and funding management authorities struggle to transform services from traditional, congregate care models to individualized supports aligned with principles of supported living services. For many service providers, stagnancy is not a result of apathy; stagnancy occurs because agencies lack the infrastructure, resources, incentives and knowledge needed to take meaningful steps towards change. The "Supported Living: Making the Difference" initiative sponsored by the NC Council on Developmental Disabilities and the Money Follows the Person Initiative through the Division of Medical Assistance, is a collaboration between Vaya Health, the National Leadership Consortium on Developmental Disabilities at the University of Delaware, and four provider agencies. The initiative convenes a wealth of expertise and resources needed to support successful transition to quality Supported Living services. This presentation shares efforts underway to transition an agency, Liberty Corner Enterprises, from congregate care models to a model aligned with the principles of Supported Living.

- Describe the Federal mandate for alternative payment models and the move away from fee for service models
- Describe the various types of alternative payment models
- Describe the risks of alternative payment models and the importance of rate setting
- Describe how to price alternative payment models using cost accounting

Jesse Smathers, MSW, LCSW-A, LCAS-A | Greta Byrd, MBA

C2: Part 1 - Supervision: Cultural Competency Issues for Clinical Supervisors *(Must take D2 to receive credit)*

This training will consist of training in supervision skills for supervisors dealing with cultural competence issues with supervisees.

- Implement two supervision skills of these culturally competent supervision strategies through role play and practice exercises
- Identify three cultural competence issues in supervision
- Practice supervision in a culturally competent context

Bob Werstein, PhD

C3: NC ABLE Accounts: Now People with Disabilities Can Save and Maintain Benefits

The 2015 NC Achieving a Better Life Experience (ABLE) Act paved the way for special, tax-advantaged savings accounts that allow individuals with disabilities to save money without endangering SSI, SSDI, Medicaid, and other supports. NC ABLE accounts, launched and administered by the NC Department of State Treasurer, open the door for qualified individuals to save on their own for today's needs and to help meet long-term financial goals, as well. Self-advocates, benefits counselors, service providers, educators, attorneys, guardians, family members, care givers — come and learn about NC ABLE account eligibility, enrollment, contributions and gifting, guardianship, checking/debit card features, qualified disability expenses, and more.

- Review the federal Achieving a Better Life Experience (ABLE) Act and NC ABLE Act
- Recognize who qualifies for NC ABLE, how to enroll and how the new ABLE accounts can be used to save money without losing benefits
- Discover how to gift funds to a NC ABLE account to assist people with disabilities, guardianship rules, checking/debit card features, qualified disability expenses, and more

Mary Buonfiglio, CFA

C4: Improving Quality by Tracking Outcomes

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

Learn the importance of data and how to use data within Dashboards to improve quality by identifying trends and proactive responses.

- What data is important?
- What is an outcome?
- What data should be measured?
- What is quality?
- What does progress mean for an individual with IDD?
- How does aggregating data help improve quality?

Barry Pollack, BA | Julie Bowden, MBA

C5: Looking for Causes in All the Right Places: Root Cause and Failure Mode Analysis to Improve Problem Solving

When faced with problems, we need to examine what is causing the effects rather than symptoms. Cause and Effect Analysis is crucial to a number of techniques designed to focus our efforts. The session will explain the basics behind Root Cause Analysis used in a reactive form to critical incidents or other problems and the basics behind Failure Mode Analysis which identifies issues from a proactive perspective but shares the same concern with causes and effects. The session will cover the basics to get the most from these techniques to help with focused problem solving. Participants will start a cause effect analysis and examine it in reaction to a problem to proactively prevent future problems.

- Review the concept of root cause analysis
- Practice using the Ishikawa Diagram (cause and effect diagram)
- Practice using the causal tree diagram
- Practice using the FMEA (Failure Mode & Effects Analysis tool)

Mark C. Medlin, MA, Lean/Six Sigma Black Belt

4:30pm

Adjourn

8:30-10:00am

BREAKOUT SESSIONS (Choose one)

D1: Part 1 - Keeping the Person at the Center of Care and Transformation (Must take E1 to receive credit)

Amidst transformation, systems change, innovation and integration, how do we take a lead role in ensuring the person with IDD is at the center of our considerations and actions? We believe everyone has the right to good health and quality of life. This requires knowledge, skills, supports, and opportunities. This session will offer evidence-informed practices, resources and discussion that can empower our work and advocacy as we strengthen our commitment to health and self-determination.

- Define good health and quality healthcare from the perspective of people with IDD
- Identify three strategies that support a focus on what matters to and is needed by people with IDD to be healthy and attain quality of life
- Describe their role in keeping the person at the center of care during the process of systems transformation

Karen Luken, MS

D2: Part 2 - Supervision: Cultural Competency Issues for Clinical Supervisors (Must take C2 to receive credit)

This training will consist of training in supervision skills for supervisors in dealing with cultural competence issues with supervisees.

- Implement two supervision skills of these culturally competent supervision strategies through role play and practice exercises
- Identify three cultural competence issues in supervision
- Practice supervision in a culturally competent context

Bob Werstein, PhD

D3: Crossing the Boundaries Between Health, Mental Health, and Social Programs to Improve Health and Social Outcomes

Interoperability across health, mental health and social programs empowers care providers with a 360-degree view of the patient/client. It is supplemented with insights to improve the ability to identify and respond to risks and vulnerabilities more quickly and consistently. The session will focus on the role of social determinants in achieving health and social outcomes in use cases such as homeless prevention, opioid use disorder, child investigations, recidivism, and complex health conditions.

- Review the role of social determinants of health in health outcomes
- Explore consent management models used to manage data access in compliance with state and federal privacy regulations
- Determine the importance of interoperability across health, mental health, and social programs
- Assess different approaches taken by HHS organizations to support data integration

Mary-Sara Gordon Jones, MBA, PMP

D4: The Children's Medicaid Benefit Guarantees (EPSDT), Due Process and Managed Care

The presentation will review the EPSDT guarantee within the Social Security Act and its implementation in North Carolina's Medicaid benefit plan for children. A discussion of the place of the EPSDT benefit in state waiver programs will follow, with time devoted to Q and A.

- Review the history, intent and current status of early periodic screening, diagnosis and treatment as the Medicaid benefit for children defined within the Social Security Act
- Examine the benefit and its relationship with state waiver programs will be addressed, with time devoted to questions and answers

Frank Skwara, MA, RN

D5: Interviewing for Program Integrity Audits and Investigations

We all conduct interviews in furtherance of our audits and investigations. Whether we are talking to our victim or complainant, subject matter experts, witnesses, subjects and/or targets, these conversations are interviews and should be approached as such. This presentation will help the participant to: recognize and articulate the signs of deception, prepare for the interview, understand the steps/stages of a good interview and how to properly document the results of the interview.

- Recognize signs of deception
- Prepare for an interview
- Identify the steps of an interview
- Demonstrate how to document the interview

William Owens, CFE

10:00-10:30am

BREAK (Exhibitor Visitation)

BREAKOUT SESSIONS (Choose one)

E1: Part 2 - Keeping the Person at the Center of Care and Transformation (Must take D1 to receive credit)

Amidst transformation, systems change, innovation and integration, how do we take a lead role in ensuring the person with IDD is at the center of our considerations and actions? We believe everyone has the right to good health and quality of life. This requires knowledge, skills, supports, and opportunities. This session will offer evidence-informed practices, resources and discussion that can empower our work and advocacy as we strengthen our commitment to health and self-determination.

- Define good health and quality healthcare from the perspective of people with IDD
- Describe their role in keeping the person at the center of care during the process of systems transformation
- Identify three strategies that support a focus on what matters to and is needed by people with IDD to be healthy and attain quality of life

Karen Luken, MS

continued on next page

10:30-12:00pm

BREAKOUT SESSIONS CONTINUED... (Choose one)

E2: Part 1 - Effective Strategies for Treating Trauma, Including Survivors of Sexual Trauma (Must take F2 to receive credit)

This training will develop an understanding of the complex treatment issues involved in working with sexual abuse survivors. Incorporating trauma-informed care into group and individual treatment will be discussed. Clinicians will be introduced to a number of resources/treatment manuals related to working with this population.

- Review complex treatment issues involved in treating this population including how to conceptualize treatment of “complex” vs. “simple” trauma presentations
- Identify necessary modifications for addressing sexual trauma in group settings vs individually
- Identify key components of the “Trauma Recovery and Empowerment” models
- Identify resources/treatment modalities that have been shown beneficial in treating sexual trauma survivors

Bob Werstlein, PhD

E3: Utilizing Data Analytics to Unlock the Value of Healthcare Data

(Please Note: This session does not qualify for NC Psychology credit)

The missions of healthcare organizations are to improve population health and reduce healthcare cost. Organizations need to know what and why events happen in the daily operations of healthcare, but also what is likely to happen in the future and what actions should be taken to get optimal operational outcomes. Healthcare data analytics support achieving healthcare missions, by explaining how descriptive, diagnostic, predictive, and prescriptive analytics differ, and how they provide value to the analysis of Emergency Department (ED) visits. We will address some common challenges and misconceptions in healthcare data analytics.

- Examine how to use different types of data analytics to analyze healthcare data, identify operational issues, and guide the decision making

Yang Jiang, MBA, MEng

E4: The Business Model for IPS-SE: Why It Matters and How to Support Fidelity Through Payment Mechanisms

(Please Note: This session does not qualify for NC Psychology credit)

Why should you bother with IPS-SE services? How can IPS-SE services not only support individuals in recovery, but how can it enhance your service array (providers) or your provider network (LME/MCOs)? Why does work matter? This session will explore those questions, as well as discuss the importance payment mechanisms have on the quality of service delivery. We will explore outcome based reimbursement mechanisms, as well as review the Division of Vocational Rehabilitation’s firsthand experience with switching from fee for service payments to milestone/outcome based reimbursement.

- Identify at least one reason that implementing/adding IPS-SE to your service array, or your provider network, makes good business sense
- Describe at least three outcomes associated with IPS-SE, and develop a possible milestone payout to support the identified outcomes
- Verbalize the benefits and possible difficulties of implementing a milestone/outcome based reimbursement mechanism for both IPS-SE providers and LME-MCO

Alice Farrar, MS, CRC | Stacy A. Smith, LPC-S, LCAS, NCC

E5: Using Collective Impact to Merge System of Care and Whole Person Integrated Care (WPIC)

As two systems based approaches, Whole Person Integrated Care (WPIC) and System Of Care (SOC) address resource development and integration via Collective Impact techniques as well as adhere to the Quadruple Aim to improve population health, patient experience, provider work experience, and contain costs. The WPIC model expands integrated care beyond linking medical and behavioral care through a strategic collaborative process. WPIC incorporates social determinants of health, or the conditions in the places where people live, learn, work, and play. By addressing conditions impacting an individual’s overall health, community health improves, health equity increases, and public and private resources are optimally distributed. Partners has begun implementing the WPIC model at its Integrated Care Centers. Partners’ SOC Department brings together family members, service providers, community agencies and natural supports in an effort to help the individual and/or family achieve their desired outcomes. Collaboration is a key component of SOC and ensures individuals and/or families receive services that are appropriate, effective, and based on individual needs. SOC is a nationally recognized framework for organizing and coordinating services and resources. The SOC model is strength-based, individually and/or family focused and coordinated in a supportive and empowering manner. Peer supports and resource navigation are essential for both models. Partners received a SAMSHA grant to expand SOC in 2017. Implementation of the grant services includes a developmental evaluation in which the team will be able implement feedback driven interventions to enhance the quality of grant implementation

- Demonstrate how conceptually and pragmatically they are combined to support Whole Person Health/Quality of Life, and detail how the systems will expand via grant activities
- Review the success of WPIC and SOC integration, implementation and the evaluation process

Jennifer Greene, MA, LPC | Lachelle Freeman, MA | Gary Walby, DPH | Jamie Sales, MaEL

12:00-1:30pm

LUNCH (Lunch-n-Learn: Includes Sailboat Sponsors; CFAC Awards Luncheon)

continued on next page

1:30-3:00pm

BREAKOUT SESSIONS (Choose one)

F1: NCTRACKS Updates

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

This session will recognize Managed Change Request (MCR) tips and common errors. The session will provide recent and upcoming changes in NCTracks. Participants will also examine ongoing activities such as re-credentialing and providing details throughout the application process. Additional Information and provider resources will be provided along with a structured question and answer session.

- Review MCR creation and submission
- Assess changes coming to the NCTracks System
- Ensure provider preparedness
- Question and discuss provider's needs

Dewey Cassell, PMP | Grace Vermeulen, BA

F2: Part 2 - Effective Strategies for Treating Trauma, Including Survivors of Sexual Trauma (Must take E2 to receive credit)

This training will develop an understanding of the complex treatment issues involved in working with sexual abuse survivors. Incorporating trauma-informed care into group and individual treatment will be discussed. Clinicians will be introduced to a number of resources/treatment manuals related to working with this population.

- Review complex treatment issues involved in treating this population including how to conceptualize treatment of "complex" vs. "simple" trauma presentations
- Identify necessary modifications for addressing sexual trauma in group settings vs individually
- Identify resources/treatment modalities that have been shown beneficial in treating sexual trauma survivors
- Identify key components of the Trauma Recovery and Empowerment" models

Bob Werstlein, PhD

F3: Medicaid Transformation 101

This session addresses a person first language review of Medicaid Transformation in North Carolina, and review and discuss an 1115 Waiver for Medicaid services. Participants will discuss the proposed tailored plans for behavioral health services in North Carolina.

- Recognize proposed Medicaid Reform in North Carolina
- Examine what the tailored plan for behavioral health services means
- Identify what an 1115 Waiver is
- Review what these changes mean for me and my family

Suzanne Bellian Thompson, MBA, MHA

F4: 1115 Substance Use Disorder (SUD) Waiver and Implementation

The presentation will discuss proposed changes to the SUD service array and implementation of an 1115 SUD Waiver.

- Examine proposed milestone implementation
- Review service definition changes
- Critique and provide feedback on the proposed changes

Kathy Nichols, LCSW

F5: Courtroom Evidence in Healthcare Fraud Cases

This course will address issues related to gathering, preserving, organizing and presenting types of evidence typically used in civil and criminal cases involving healthcare fraud.

- Identify types of evidence useful in civil and criminal fraud cases
- Identify best practices for collection and retention of evidence obtained in fraud cases
- Identify how to organize and present evidence to the single state agency in a manner that will increase the quality of the referral

Timothy R. Rodgers, BA, JD

3:00-3:15pm

BREAK

3:15-4:45pm

BREAKOUT SESSIONS (Choose one)

G1: Business Ethics Involved with Medicaid Dollars

This session will discuss the frameworks for evaluating complex decisions in the context of Medicaid. The following panel will cover issues that decision and policy makers are faced with in the context of Medicaid Spending, both day 1 and day 2 sessions. Panelists will include representatives from provider, DHHS, legislator, higher education, and member. Discussion topics will include making tough decisions in complex situations.

- Identify and discuss approaches such as Consequentialism, Means Justify the Ends, Ends Justify the Means and other decision paths with clear examples of how those come into place and what the consequences are to each.

Trey Suttan, MBA

G2: Part 1 - Ethical Issues: Microaggression (Must take H2 to receive credit)

This training will review ethical issues regarding discrimination, prejudice, and microaggression in treatment. Number of session hours for credit: 3 hours of ethics training

- Define microaggression and cite the relevant ethical standards within their ethical code
- State three types and identify five common themes of microaggression
- State four reasons why we commit microaggression and identify the negative impacts on the therapeutic relationship
- Implement at least six strategies for change in their behavior

Bob Werstlein, PhD

continued on next page

BREAKOUT SESSIONS CONTINUED... (Choose one)

G3: Addressing the Emerging Roles and Expectations of the Direct Support Workforce to Improve Long-term Support Service Outcomes

This session offers a reflection on the evolving role and expectations of direct support professionals (DSPs). Role changes are driven by funders, families and people with disabilities. This will ultimately create an emphasis on personal autonomy, greater access to integrated settings, and helping people to make informed choices. This session will address how we support people with disabilities to make informed decisions. The presenter will explore the role of the DSP, DSP competencies in the NC Innovations waiver, and an initiative in the Vaya Health catchment area designed to provide DSPs the tools, resources, and skills necessary to achieve their responsibilities to the people they support.

- Describe the evolving roles of the direct support professional (DSP)
- Describe the supporting informed decision making process used by DSPs to empower the people with intellectual disabilities that they support
- Identify the core competencies required by the NC Innovations waiver by November 1, 2018
- Identify strategies to empower agencies to ensure that DSPs are trained in the required core competencies

Jesse Smathers, MSW, LCSW-A, LCAS-A

G4: Mobile Health: Improving Outcomes Through Increased Member Engagement

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

The session will focus on the importance of engaging members, patients, and internal users as part of the larger ecosystem of care. Although this is not a new idea, we are seeing shifts from functionality to experience and to providing users the experience they want instead of simply the functionality they need. This session will explore the use of mobile apps and online portals to understand how HHS organizations are engaging members, patients, and internal users to support a more integrated system of care.

- Demonstrate an understanding of the issues historically underlying online engagement
- Examine different approaches taken by HHS organizations to improve member engagement
- Assess the value and importance of improving engagement and integration across the HHS ecosystem

Mary-Sarah Gordon Jones, MBA, PMP

G5: Overview of the Office of Compliance and Program Integrity (OCPI) from a Director's Perspective

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

Overview of the OCPI Organization.

- Explain the OCPI organization and their work

John Thompson, Director of OCPI | Patricia Meyer, RN, BC CPIP

4:45pm ADJOURN



REGISTRATION: 8:15am - 10:00am

PROGRAM: 8:45am - 12:00pm

8:45-10:15am **BREAKOUT SESSIONS** *(Choose one)*

H1: The Importance of Cultural Competency in Every Behavioral Health Business

Cultural competency is explored in every behavioral health business at the intersection of social determinants, cultural determinants and healthcare disparities. The specific examples of North Carolina's healthcare disparities will be examined and participants will discuss potential solutions. Terminology specific to cultural competency will be reviewed in an effort to increase cultural awareness.

- Identify the need to increase awareness of cultural competency
- Explore North Carolina specific healthcare disparities
- Examine the impact of cultural competency on behavioral health businesses
- Analyze potential solutions to healthcare disparities

Michelle J Edelen, MBA

H2: Part 2 - Ethical Issues: Microaggression *(Must take G2 to receive credit)*

This training will review ethical issues regarding discrimination, prejudice, and microaggression in treatment. Number of session hours for credit: 3 hours of ethics training

- Define microaggression and cite the relevant ethical standards within their ethical code
- State four reasons why we commit microaggression and identify the negative impacts on the therapeutic relationship
- Implement at least six strategies for change in their behavior
- State three types and identify five common themes of microaggression

Bob Werstlein, PhD

H3: Dashboards: What's New and Next?

(Please Note: This session does not qualify for NC Psychology or NBCC credit)

This session examines current dashboard reporting from LME/MCO use to what both Vaya and Trillium are planning for their next steps. Presenters will illustrate current and future dashboards reporting applicable to other MCO's, Providers and stakeholders. The session will include uses for dashboard reporting, how providers can use their existing data for use in longitudinal trending, QIP's, and business processes.

- Review current dashboards used by LME / MCO's (Why are we asking for all this data?)
- Formulate a vision of where Vaya and Trillium are looking to go next
- Examine how to leverage dashboards to improve decision support and business processes
- Demonstrate an understanding of the issues historically underlying online engagement
- Examine different approaches taken by HHS organizations to improve member engagement
- Assess the value and importance of improving engagement and integration across the HHS ecosystem

Chris Penrod, MBA, BSA, BSAE | Angela Levis-Myers, MA | Stacey Henderson, IT Applications Developer

H4: How is Your Voice Heard?

This session will provide an overview of what Advocacy is and consider ways in North Carolina for your voice to be heard. There will be a discussion of the importance of effective advocacy.

- Define what advocacy is
- Examine ways to get your voice heard
- Determine how to effectively advocate

C.J. Lewis, MA

H5: The Birth, Life, and Death of a Medicaid Fraud Case

(Please Note: This session does not qualify for NC Psychology credit)

The presentation will walk thru stages of Medicaid Investigations Division (MID) involvement in an investigation from review and acceptance thru conviction and closing. This session will explain ideas and rationale behind MID actions.

- Examine MID practices and procedures
- Recognize the rationale behind MID action
- Identify procedures of Medicaid fraud enforcement in North Carolina

Douglas Thoren, JD

10:15-10:30am **BREAK**

10:30-11:45am **CLOSING PLENARY:
State of the State**

Evolution continues in the World of Behavioral Health. In this session, the learner will be provided with updates regarding activity at the state level and will assist in providing perspective on the plan moving forward. This session will cover recent policy issues, legislative issues, budget issues, and discuss how these will affect the future direction of behavioral health in NC. Time will be allowed after the presentation for questions from participants.

- Describe current policy and upcoming changes
- Identify legislative and budget updates
- Describe the future of behavioral health and the role that DMA will provide

Lisa Haire, MSW

11:45am **DOOR PRIZES & CLOSING**

FACULTY

SUSAN DLOUHY, MA

Susan Dlouhy is the chief operating officer of Creative Abundance Consulting. She has worked for more than 30 years in a variety of administrative and executive roles supporting people with disabilities. She served as the director of two non-profit agencies in Ohio and has consulted with organizations in more than 20 states. She is currently the operations director for Passion Works Studio in Athens, Ohio.

Susan worked as the administrator for a statewide association for 12 years, where she developed training and provided technical assistance to sheltered workshops and day programs across Ohio. She was also a CARF surveyor for more than 25 years.

She is the managing director of Norwich Consulting Services, which provides technical assistance and training in the areas of community employment, strategic planning, and executive leadership mentoring. She has served as the interim director for numerous organizations and has helped transform programming to the Creative Abundance Model. Susan obtained her bachelor's degree from Kent State University and her master's degree in Rehabilitation Counseling from The Ohio State University.

LANIER M. CANSLER, CPA

Lanier brings over 39 years of experience working with the healthcare industry and in healthcare policy development and implementation at the state government level. Lanier offers a unique understanding of the issues surrounding health promotion and healthcare from multiple perspectives. Lanier practiced in public accounting for almost 20 years, placing a significant focus on financial and management services to healthcare providers and provider organizations at a time technology was gaining a foothold in the healthcare industry. Then, elected to four terms as a member of the North Carolina General Assembly, he chaired health committees and led efforts in the development of healthcare policy and budgetary initiatives in the state legislative arena including the development of the state's CHIP program and Medicaid expansion. Finally, as a member of the Governor's Cabinet and Secretary of North Carolina's Department of Health and Human Services, he had the responsibility for policy implementation and management in the state executive branch of government during one of the most financially challenging times in the state's history, working to maintain access to quality care while controlling budget growth, including the enhancement of program integrity efforts.

As a consultant, legislator, and departmental secretary, Lanier has worked closely with state leadership and leadership in healthcare provider organizations, identifying opportunities and developing strategies to enhance the ability of the state to move toward a more comprehensive approach to care while enhancing management of the state's Medicaid program. His understanding of the healthcare delivery system, coupled with his knowledge of the issues and challenges facing state governments, provides a significant benefit in the planning and implementation for healthcare system reform and the use of technology and analytics in establishing a more comprehensive, effective, and efficient approach to care that can coordinate critical aspects of the health and human services systems.

SARAH PFAU, JD, MPH

Sarah was the associate director for policy and regulatory affairs in the Division of Medical Assistance, NC DHHS, before joining Cansler Collaborative Resources, Inc. (CCR) in January 2018. Sarah has 25

years of health policy experience in national non-profit organizations, academia, and public interest law and more than six years of experience in the regulatory environment for the North Carolina Medicaid and Children's Health Insurance (NC Health Choice) programs. Sarah monitors and analyzes federal and state legal authorities and sub-regulatory guidance in health law to inform CCR clients' policy and operational decisions and strategies.

NIELS ESKELSEN, MBA

Niels is currently serving as the chief business officer for Partners BHM. Niels served as the CFO and director of business operations for PBH (now Cardinal Innovations) from July 2006 to September 2010. Prior to PBH, Niels was an associate and partner in several national consulting firms, specializing in behavioral healthcare and managed behavioral healthcare systems since 1996. Niels has held the position of chief finance and administrative officer for a large comprehensive behavioral healthcare provider. As a presenter at national and state level conferences, Niels covered topics such as: managed care system design, organizational management in managed care organizations, providing network development and monitoring, performance indicator development and dashboard reporting, utilization of clinical data in service management, incentive compensation programs, and others. Niels earned a CPA license in 1977.

ALLISON GOSDA, MA, LPC, LPCS, MAC

Allison is a visionary leader in healthcare. She has earned a Master of Arts in Human Development Counseling from the University of Illinois and a Master of Business Administration - Healthcare Management from Western Governor's University. With dual licensure in professional counseling and addictions, she brings over 28 years of experience with a demonstrated history of working in the behavioral health, managed care, and education industries. She is skilled in management, program development, care coordination, counseling, and crisis stabilization and recognized for her talents in strategy development and providing leadership. Allison devises and implements new programs and initiates successful processes to produce outcomes with maximum impact.

BOB WERSTLEIN, PhD

Bob received his doctorate in Clinical Psychology from Auburn University in 1978. He has serviced as clinical director of three psychiatric hospitals (33, 75, and 114 bed) and several outpatient centers in his 40-year career. He retired from Daymark in 2017, having served there for 14 years as their clinical director and then training director. He continues to provide occasional training on contract with Daymark and internationally with Summit Church Mission Programs.

BARB KUNZ, MEd

Barbara is currently the workforce development manager at NC DHHS. She also works with an internal organization development consulting group to support management efforts to innovate, improve and streamline service delivery. She is also responsible for the department's leadership development program - LEADERSHIP DHHS.

Her areas of specialty include strategic planning and succession planning team development and employee engagement, executive coaching, LEAN facilitation, and Change Management

Prior to that she was section chief for the Employee and Management Development group within the HR Division.

FACULTY CONTINUED...

Her past experience includes roles as a performance management consultant with the NC Office of State Personnel; associate director of Continuing Education at Duke University; and director of Career Development and Counseling at Converse College. She earned tenure as an assistant professor at Indiana University of Pennsylvania.

In addition, she is a past president of the Research Triangle Chapter of the American Society of Training and Development and also served as a consultant to developing chapters for the national organization. During her term, the chapter received a national award of excellence as one of 7 chapters specifically for innovation, management of resources and service delivery.

CALVIN HARVEL, NC CPSS

Calvin is a certified peer support specialist with Atrium Health, Behavioral Health-Charlotte. In this role, Calvin works as an advocate for children and adult patients and their families in the Emergency Department. Calvin is also a certified hypnotist and spiritual director. Over the years, Calvin has traveled with many on the road to recovery, reaching out to share the gift with others that he was given in recovery. His journey strengthens his role as a patient advocate and peer support specialist. Calvin is a member of the Charlotte chapter of NAMI and of the International Association of Peer Supporters.

DAVID BOYLE, CPSS

David is a teammate of the Atrium Health, Behavioral Health-Charlotte hospital as a full-time peer support specialist. In addition, he is a part-time continuing education art instructor with Central Piedmont Community College where he facilitates an art health course to individuals with a mental health/behavioral health diagnosis. David also speaks on a panel to law enforcement officers, crisis intervention team training (CIT), that present on behalf of mental and behavioral health challenges and police interaction.

SMITH WORTH, LCSW, LCAS

Smith is the administrator for the North Carolina State Opioid Treatment Authority, NC Division of MH/DD/SAS with more than 30 years of substance abuse treatment experience. She serves on the board of directors for the North Carolina Substance Abuse Professional Practice Board. Smith received her bachelor's degree in Sociology and Criminal Justice from North Carolina State University and was awarded a master's degree in Social Work from the School of Social Work at the University of North Carolina at Chapel Hill. She is a licensed clinical social worker and a licensed clinical addiction specialist.

AMY MORRIS, LPN, CSAC

Amy is a practical nurse and substance abuse counselor with more than ten years experience in the opioid treatment field. She has worked in direct care, administrative, and regulatory compliance roles in OTP programs in several states, across the US. She currently serves as a consultant for NC DHHS/DMH/DD/SA to provide technical assistance and quality improvement initiative for the 65 NC Opioid Treatment Programs.

PATTY MITCHELL, MFA

Patty is the chief executive officer of Creative Abundance Consulting. She has worked since 1994 as an artist in residence and social innovator specializing in collaborations between makers with and without perceived differences. She founded one of the first collaborative art studios (Passion Works Studio – Athens, OH) in the country in 1998. After a ten-year hiatus, she recently returned as the CEO/executive director of Passion Works. Patty received a "Distinguished Alumna" award from Ohio University's College of Fine Art, "Ohio-ana Citation for Art and Education, Individual Artist" award from the Ohio Arts Council, "Citizen of the Year" from Civitan, and "The Keystone Award" from Ohio University for outstanding community service. Patty received her BFA and MFA from Ohio University's Fine Art Photography program. She is currently a community fellow at Ohio University with the Barbara Gerald's Storytelling Institute.

JULIA AUGUSTONI, MA

Julia is native of North Carolina and attended Western Carolina University graduating with a Major in Home Economics and a master's degree in Industrial Education. Contrary to her chosen field of study she began her career in Winston Salem working with the area program as a job coach with individuals with Intellectual and Developmental Disabilities. Over her 28-year career she has advanced through numerous positions and is currently a director of Program Operations with Monarch. Over the past several years Monarch has been transitioning their vocational and day programs to arts and community based programs and Julia has been responsible for the smooth transition of those programs. This has involved working with stakeholders, community leaders, various MCO's, providers, families, staff and the persons supported to insure that the transitions happened as seamlessly as possible.

VINCE JOYCE, CPHIMS

Vince is a certified professional in Health Information Management Systems (CPHIMS) with extensive knowledge of behavioral healthcare. He founded e3 Informatics in 1998 to assist behavioral healthcare providers and payers with claims management, data analysis, and software system implementation. Vince is an authority on HIPAA compliant electronic data interchange (EDI), and he is a longtime member of ASC X12 and WEDI. He has worked with MCOs and providers all across North Carolina. Vince is a graduate of UNC-Chapel Hill with degrees in Economics and Public Policy Analysis.

PATRICIA MEYER, RN, BC CPIP

Patricia is a lifetime resident of North Carolina and a registered nurse with 40 years of professional experience, 28 of those years spent committed to state and local government and the past 11 years with DMA. She is the supervisor/manager of the Western Team of OCPI (formerly Medical Review Section of OCPI) consisting of investigators, nurse consultants and social workers. She has a National Nurses Association National Board Certification in the area of General Nursing Practice, previous National Board Certification on Psychiatric and Mental Health Nursing, and is a Certified Program Integrity Professional.

JESSE SMATHERS, MSW, LCSW-A, LCAS-A

Jesse is the specialty populations clinical director for Vaya Health. In addition, Jesse is also project lead for the Supported Living: Making a Difference Initiative that Vaya was awarded by the NC Council on Developmental Disabilities.

GRETA BYRD, MBA

Greta is the executive director of Liberty Corner Enterprises. Greta has over 20 years experience working with individuals with intellectual disabilities in various leadership roles. She began her career as a direct support professional in a congregate living arrangement.

MARY BUONFIGLIO, CFA

Mary is deputy director of the North Carolina Supplemental Retirement Plans and North Carolina ABLE Program. Her primary duty is to ensure financial preparedness for North Carolina's public servants and citizens living with disabilities. Mary's responsibilities include strategic planning, plan compliance, fiduciary best practices, and vendor management for the NC Total Retirement Plans 401(k), 457 and 403(b) Plans and NC ABLE Program. Before joining NC Retirement Systems, Mary was managing director and regional investment executive for Private Advisory Services at Bank of America, where she led a team assisting clients with their wealth management needs. Her 25 years' experience in investment services and wealth management includes working with individuals, corporations, and non-profits. Mary has a BS in Business Administration and an MBA in Finance from the University of Florida, Gainesville. She is also a Chartered Financial Analyst (CFA) and enjoys volunteering in her community as a mentor and advocate.

FACULTY CONTINUED...

BARRY POLLACK, BS

Barry has over 35 years of experience working with organizations supporting individuals with intellectual & developmental disabilities, with 20+ years in executive management.

Barry earned his Bachelor of Arts degree in Social Welfare from the California State University Northridge (CSUN) in 1983. He started his career in California with the United Cerebral Palsy national network and led one of the largest respite care programs in the country in the 1990s. He also led the creation of both the North Carolina & South Carolina Respite Care Coalitions. Since the 1980s, Barry has worked with state and county government, state provider associations and private non-profit organizations in the planning, development and delivery of services to individuals of all ages and disabilities.

Since 2010, Barry has worked with Therap Services, supporting providers in the implementation and use of their industry leading IDD specialized electronic documentation, reporting, and analytics solution. Barry continues to contribute to the IDD industry through consulting in strategic planning, organizational development, and the delivery of services to individuals of all ages and disabilities.

JULIE BOWDEN, BS, MBA

Julie has been working in human services for over 20 years, working in mental health, substance abuse, and IDD. She started her career in southern Oregon, providing needs assessments for individuals who were homebound. Julie then moved to public health and was instrumental in passing smoke-free workplace laws in local communities prior to state legislation.

Julie moved to Greensboro, North Carolina in 2003 where she started working in IDD. She worked as an exceptional children's teacher at a charter school, Easter Seals UCP and Bayada Home Health Care. Julie started a new office in Wilmington, NC with Bayada, providing services to individuals with IDD. In 2012, Julie became a user of Therap while working at Bayada Home Health Care.

Julie earned her Bachelor of Science in Psychology from Southern Oregon University and her Master of Business Administration from University of Phoenix.

MARK MEDLIN, MA, Lean/Six Sigma Black Belt

Mark serves as Lean/Six Sigma instructor and project coach for Mission Health's IT Division. With over 10,000 employees and 1,000 physicians, Mission Health is Western North Carolina's largest health system. Mark has over 30 years experience teaching quality improvement concepts, tools and methods. His quality journey began with a seminar taught by Dr. W. Edwards Deming, one of the founders of the quality movement.

KAREN LUKEN, MS

Karen has more than 35 years of experience in disability and health, recreational therapy, and grants management. Karen is the project director for the "Medical Health Homes for People with Developmental Disabilities" initiative, funded by the NC Council on Developmental Disabilities, to explore best practices in integrated care for people with intellectual and developmental disabilities. The initiative is presently evaluating the implementation of two evidence-based consultation models that support primary care practices to provide comprehensive care to children and adults with IDD. Prior to this work Karen was the project director for the North Carolina Office on Disability and Health, utilizing a public health approach to promote health equity, address chronic disease, and improve the quality of life of people with disabilities. Earlier in her career she was the associate director of the Center for Recreation and Disability Studies at UNC-CH. Karen received a BS in Therapeutic Recreation from the University of Illinois-Urbana, a MS degree in Recreation and Leisure Studies, and certificate in Public Health from UNC-Chapel Hill.

MARY-SARA GORDON JONES, MBA, PMP

Mary-Sara is a business development executive supporting health and human services for IBM US state and local. Mary-Sara brings more than 20 years experience in health and human services, transforming service delivery through the use of technology and providing direction to navigate policy and business challenges. Working with agencies across the US and globally, she has assisted agencies work beyond the boundaries of their organizations to provide a more holistic, person-centered approach to care. Today, Mary-Sara focuses on leveraging integrated data and cross program collaboration to expand preventive approaches and address social determinants.

FRANK SKWARA, MA, RN

Frank serves as a nurse consultant for North Carolina's Division of Medical Assistance. His role is currently focused on state compliance with the federal EPSDT Benefit and Beneficiary Right of Due Process. He also manages Health Check, the state's program for early, periodic screening. His 30-year career includes the management of behavioral health and medical care delivery systems and the direct delivery of healthcare services as a provider in family therapy, palliative care, home care, prison and emergency room settings.

WILLIAM OWENS, CFE

William is currently the program integrity director at Partners Behavioral Health Management in Gastonia, NC. He has over 28 years of experience in the federal inspector general community where he conducted, supervised, and managed investigations into allegations of fraud, waste, abuse and mismanagement in government operations and programs.

YANG JIANG, MBA, MEng

Yang is the data analyst for Partners Behavioral Health Management. He performs statistical data analysis using data-mining tools to support strategic planning and decision making. Previously he was director of institutional research at University of South Carolina Upstate. He provided leadership with data analysis and internal/external reporting obligations. Prior to joining USC Upstate, he worked at National Institution of Health (NIH) as a senior application engineer leading research projects and developing statistical models of neuronal data.

ALICE FARRAR, MS, CRC

Alice joins us from the NC Division of Vocational Rehabilitation as the chief of employment services and program development. She has a long tenure in the field of rehabilitation with 30 years in the profession. Her early years with the state agency include working as evaluator, counselor, and counselor-in-charge. After ten years in the field of private rehabilitation, Alice returned to the agency as a VR counselor and moved quickly back into her original counselor-in-charge position and spent a short time the program specialist for transition before switching programmatically to community rehabilitation programs. Alice has been with The Division of Vocational Rehabilitation through the development of milestone funding, creation of an electronic case management system, implementation of Individual Placement and Support services, and new legislation resulting in a major overhaul of policy and practice.

STACY A. SMITH, LPC-S, LCAS, NCC

Stacy is the adult mental health team lead in the Community Mental Health Section of NC Department of Mental Health, Developmental Disabilities, and Substance Abuse Services. She has her undergraduate degree in Music Therapy and obtained her graduate degree in Counselor Education from North Carolina State University. She has worked in the field of adult mental health since 1998, in settings that include in-patient and community based settings. Stacy has worked closely with the Transitions to Community Living Initiative (TCLI) on developing plans to ensure that the systems and services available to adults in North Carolina with serious mental illness are recovery based and community focused. She has developed and facilitated trainings

FACULTY CONTINUED...

on TCLI, Assertive Community Treatment, Individual Placement and Support-Supported Employment, Recovery and Community Inclusion, and Harm Reduction.

JENNIFER GREENE, MA, LPC

Jennifer serves as the integrated care project manager for the Whole Person Integrated Care (WPIC) initiative at Partners Behavioral Health Management. Jennifer oversees the operational details to implementing WPIC throughout the Partners' region. Previously, Jennifer has worked to build collaborative relationships for improved healthcare over the last several years. She provided oversight to the collaborative efforts of the four agencies that make up the Lincoln Wellness Center. Through those efforts, Jennifer served as part of the team that earned the NC Council Program of Excellence Award in Crisis Response in 2015 and the NC Outstanding CIT Partnership Award for 2016. Jennifer has served children and families through multiple service delivery settings in six of the eight counties in the Partners' region.

Jennifer is a licensed professional counselor with a BA in Psychology with an Industrial Organizational emphasis from Davidson College and a MA in Mental Health Counseling with a School Counseling add-on from Lenoir Rhyne University.

LACHELLE FREEMAN, MA, QP

Lachelle is a qualified professional with over 21 years of experience in the mental health field. She has worked as a provider delivering mental health services to individuals and families, assisted with research, and developed and managed Partners' Appeals Unit for five years. Lachelle has also served as a mental health first aid instructor and a family to family instructor for National Alliance on Mental Illness (NAMI). Lachelle has been charged with expanding Systems of Care (SOC) to four counties in west/central NC, serving youth with Serious Emotional Disturbances/Serious Mental Illness or first episode psychosis and families by collaborating with community stakeholders through a Substance Abuse and Mental Health Services Administration (SAMHSA) Grant.

Lachelle earned her Bachelor of Arts degree from Lincoln University, and holds a Master of Arts degree in Counseling Psychology from Geneva College.

GARY WALBY, DPH

Gary's career has spanned clinical practice, research, evaluation, community network improvement, and resource and sustainability development. He has focused on the enhancement and application of systems-based intervention for clinical practice and evaluation for much of his career. As a clinician, he specializes in working with families at risk, substance use, and adults with severe mental illness. He is an abuse/trauma treatment specialist with over 30 years of clinical practice. As an evaluator, he ensures that all evaluations, simple to intricate, are contextually relevant and applies systems and complexity models to enhance findings and to develop sustainability for the client.

JAMIE SALES, MaEL

Jamie works to develop strategic initiatives to advance the system of care model for members in the Partners' eight-county service area.

Jamie has worked closely with the state's Crisis Intervention Team (CIT) Training program, presenting at state and national CIT conferences, including the NC Chief of Police Conference, Jail Administrator Conference, and the Governor's Crime Commission Conference on Safe Communities.

Jamie has a Bachelor of Arts degree in Human Services from the University of North Carolina at Charlotte and is currently pursuing a Masters in Executive Leadership from Liberty University.

DEWEY CASSELL

Dewey supports Communications and Quality Assurance for CSRA, the fiscal agent vendor of the state responsible for implementation and operation of NCTracks. Mr. Cassell has been with CSRA for nine years, having previously worked with EDS.

GRACE VERMEULEN

Grace works in communications as a publications associate for CSRA. She previously practiced freelance public relations and marketing.

SUZANNE BELLIAN THOMPSON, MBA, MHA

Suzanne has worked in mental health, developmental disabilities and substance abuse services field for more than 30 years. She currently works as the team leader for the Community Engagement & Empowerment Team with the Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS). She has a bachelor's degree in Psychology from James Madison University and master's degrees in Business Administration and Health Administration from Pfeiffer University. She has held many positions over the years from direct care to administrative.

KATHY NICHOLS, LCSW

Kathy is the assistant director, Services and Supports, for the NC Division of Mental Health Developmental Disabilities and Substance Use Services. Prior to that, she served as the behavioral health manager for NC Medicaid, the acting advisor on ADA and Olmstead, and a policy analyst for Medicaid Transformation. She has over twenty years of experience working with the homeless, mental health, and substance use populations in NYC. She holds a master's degree in Social Work from New York University and a certificate in Public Health from Johns Hopkins.

TIMOTHY R. RODGERS, BA, JD

Tim is a special deputy attorney general with the Medicaid Investigations Division (MID), North Carolina Department of Justice. Tim has prosecuted Medicaid provider fraud cases as well as patient abuse and neglect cases for the MID for the last six years. Tim is cross-sworn as a special assistant United States attorney in the Western District of North Carolina. Prior to working with the MID, Tim spent nearly 13 years as an assistant district attorney in a rural multi-county district in central North Carolina where he handled cases ranging from speeding tickets to homicides.

TREY SUTTEN, MBA

Trey is responsible for all day-to-day management decisions, and for implementing Cardinal Innovations' long and short term plans. In his dual role as interim CFO, Suttten also oversees all financial reporting and operational activities of the organization.

JOHN THOMPSON

John is the director of Office of Compliance and Program Integrity. John served as senior manager for the Office of Internal Audit with the NC Department of Health and Human Services. John has an accounting background and more than 20 years of audit experience. He also served six years as a chief financial officer for a software company during which he managed IT, Legal, HR, and finance operations.

MICHELLE J. EDELEN, MBA

Michelle is the policy advisor for Community Affairs at the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services. Ms. Edelen is a seasoned professional in the area of cultural competency and diversity. She has presented in this area within state government and consulted externally in the private sector. Ms. Edelen brings a unique perspective to the discussion of ethics in cultural competency because she has studied the subject and she has lived the experience. A product of the South where biases have been tolerated but are beginning to be rooted out through collaboration, conversation

FACULTY CONTINUED...

and education, Ms. Edelen is poised and ready to help those who want to grow in this area. She uses her business acumen to help business owners understand the impact cultural competency has on their bottom line as well as the impact on their workforce and the people they serve. Also, Ms. Edelen holds dual BA degrees in Economics and Business Management from North Carolina State University and a Master of Business Administration from Meredith College, both in Raleigh, North Carolina.

CHRIS PENROD, MBA, BSA, BSAE

Chris has worked in the North Carolina behavioral health MCO / LME arena since 2012, starting at CoastalCare as a financial analyst manager and currently as the informatics director of Trillium. Prior to that, he worked for two decades in the physical health industry with over eight years of experience as a chief financial officer for two Federally Qualified Health Centers and nearly 15 years in a hospital setting. Chris holds several degrees in engineering and business and currently serves on the UNCW Data Science Advisory Board and the Institute for Medicaid Innovation (IMI), among others.

ANGELA LEWIS-MYERS, MA

Angela has worked for Vaya Health (formerly Smoky Mountain LME/MCO) since 2012, starting as a quality management analyst. Prior to that, she worked in community mental health for over five years. Angela holds a master's degree in Experimental Psychology and is currently finishing her MSW degree. She is a Certified Healthcare Data Analyst (CHDA) through AHIMA and a certified investigator. Angela has worked for the past three years with IBM, identifying fraud, waste, and abuse in the NC Medicaid system.

STACEY HENDERSON

Stacey started in the behavioral health field in 2007 and worked in quality management as a quality improvement director. Stacey then transitioned from the private provider world and began working with the former ECBH MCO/LME in 2011, as a senior data analyst. After the consolidation of CoastalCare and ECBH in July 2015, she transitioned to the role of report developer and IT applications developer for Trillium Health Resources. Stacey is currently pursuing her graduate degree in the field of Health Informatics and Information Management, with an upcoming graduation date of May 2018.

C.J. LEWIS, MA

Chris has over 15 years of personal and professional experiences in the area of human services. He earned a master's degree in Counseling from Clark Summit University in Pennsylvania and received his bachelor's degree from the University of Alaska, Anchorage. He has worked with organizations in both Alaska and North Carolina in the areas of education, respite, residential and advocacy services for youth and adults. He also worked as an advocate within Murdoch Developmental Center for several years. Chris has been serving as a mental health program coordinator on the Customer Service and Community Rights Team and Community Engagement and Empowerment Team with the Division of Mental Health/Developmental Disabilities and Substance Abuse Services since the fall of 2015.

DOUGLAS THOREN, JD

Doug is currently a special deputy attorney general and chief of the Criminal Section of the North Carolina Department of Justice Medicaid Investigations Division (MID). Doug has served as an assistant attorney general, special deputy attorney general and special assistant United States attorney with the MID since 2001. He has handled state and federal criminal prosecutions involving healthcare fraud, patient abuse and exploitation throughout North Carolina. He has also dealt with numerous civil matters and cases falling under the False Claims Act. He oversees all aspects of investigations from intake thru trial and a team of seven prosecutors. Doug also serves as co-chair of the National Association of Medicaid Fraud Control Units Training Committee and as an instructor in the 101, 102 and 103 Medicaid fraud investigation classes. Doug is a 1988 graduate of Seton Hall University and a 1993 graduate of the Temple University School of Law.

LISA HAIRE, MSW

Lisa is the Assistant Director of Quality Management and Operations with the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services. Lisa provides administrative direction and oversight in the areas of quality management, Local Management Entities-Managed Care Organizations (LME-MCOs) liaisons and relationship management, project management for special initiatives, audit and monitoring of LME-MCOs, block grant and state single stream funds use, and NC TRACKS state services team.

2018 CONFERENCE

BREAKOUT SELECTION

REGISTRATION FORM - PAGE 1 OF 2

YOU MUST SELECT FROM THE BREAKOUTS BELOW FOR DAY(S) THAT YOU WILL ATTEND AND SUBMIT WITH THE REGISTRATION FORM ON THE NEXT PAGE.

Mental Health Credits (NBCC & NC Psychologist) **ARE NOT** offered for the following Sessions: A1, A4, B4, C4, F1, G4, G5, H3
Mental Health Credits (NC Psychologist) **ARE NOT** offered for the following Sessions: E3, E4, H5

DAY 1, APRIL 23, 2018

BREAKOUT A (10:15-11:45AM) I AM NOT ATTENDING THIS BREAKOUT

- A1:** NC 1115 Waiver Update: Preparing for the Shift in NC Medicaid
- A2:** Developing an In-Lieu of Service: Mobile Outreach Response Engagement Stabilization (MORES) Pilot Implementation
- A3:** Management of Adolescent Self-Injurious Behavior
- A4:** Interaction Management/Team Building
- A5:** How to Gain Success with Quality Improvement Learning Collaborative

BREAKOUT B (1:15-2:45PM) I AM NOT ATTENDING THIS BREAKOUT

- B1:** Advancing Recovery in the Hospital: How to Utilize Peer Support Services
- B2:** Treating Opioid Use Disorders and the MAT Continuum of Care
- B3:** Creative Abundance: Engagement, Community Partnerships and Economic Opportunities
- B4:** Using Cost Accounting to Price Alternative Payment Models

BREAKOUT C (3:00-4:30PM) I AM NOT ATTENDING THIS BREAKOUT

- C1:** Closer to Free: Receiving My Supports in My Home
- C2:** Part 1 - Supervision: Cultural Competency Issues for Clinical Supervisors
(must take D2 to receive credit)
- C3:** NC ABLE Accounts: Now People with Disabilities Can Save and Maintain Benefits
- C4:** Improving Quality by Tracking Outcomes
- C5:** Looking for Causes in all the Right Places: Root Cause and Failure Mode Analysis to Improve Problem Solving

DAY 2, APRIL 24, 2018

BREAKOUT D (8:30-10:00AM) I AM NOT ATTENDING THIS BREAKOUT

- D1:** Part 1 - Keeping the Person at the Center of Care and Transformation
(must take E1 to receive credit)
- D2:** Part 2 - Supervision: Cultural Competency Issues for Clinical Supervisors
(must take C2 to receive credit)
- D3:** Crossing the Boundaries Between Health, Mental Health, and Social Programs to Improve Health and Social Outcomes
- D4:** The Children's Medicaid Benefit Guarantees (EPSDT), Due Process and Managed Care
- D5:** Interviewing for Program Integrity Audits and Investigations

BREAKOUT E (10:30-12:00PM) I AM NOT ATTENDING THIS BREAKOUT

- E1:** Part 2 - Keeping the Person at the Center of Care and Transformation
(must take D1 to receive credit)
- E2:** Part 1 - Effective Strategies for Treating Trauma, Including Survivors of Sexual Trauma
(must take F2 to receive credit)
- E3:** Utilizing Data Analytics to Unlock the Value of Healthcare Data
- E4:** The Business Model for IPS-SE: Why It Matters and How to Support Fidelity Through Payment Mechanisms
- E5:** Using Collective Impact to Merge System of Care and Whole Person Integrated Care

BREAKOUT F (1:30-3:00PM) I AM NOT ATTENDING THIS BREAKOUT

- F1:** NCTRACKS Updates
- F2:** Part 2 - Effective Strategies for Treating Trauma, Including Survivors of Sexual Trauma
(must take E2 to receive credit)
- F3:** Medicaid Transformation 101
- F4:** 1115 Substance Use Disorder Waiver and Implementation
- F5:** Courtroom Evidence in Healthcare Fraud Cases

BREAKOUT G (3:15-4:45PM) I AM NOT ATTENDING THIS BREAKOUT

- G1:** Business Ethics Involved with Medicaid Dollars
- G2:** Part 1 - Ethical Issues: Microaggression
(must take H2 to receive credit)
- G3:** Addressing the Emerging Roles and Expectations of the Direct Support Workforce to Improve Long-term Support Service Outcomes
- G4:** Mobile Health: Improving Outcomes Through Increased Member Engagement
- G5:** Overview of OCPI from a Director's Perspective

DAY 3, APRIL 25, 2018

BREAKOUT H (8:45-10:15AM) I AM NOT ATTENDING THIS BREAKOUT

- H1:** The Importance of Cultural Competency in Every Behavioral Health Business
- H2:** Part 2 - Ethical Issues: Microaggression *(must take G2 to receive credit)*
- H3:** Dashboards: What's New and Next?
- H4:** How is Your Voice Heard?
- H5:** The Birth, Life, and Death of a Medicaid Fraud Case

2018 CONFERENCE

REGISTRATION FORM - PAGE 2 OF 2

YOU MUST SELECT THE BREAKOUTS ON THE PREVIOUS PAGE FOR EACH DAY THAT YOU WILL ATTEND AND SUBMIT WITH THE REGISTRATION FORM.

By registering for this conference, you are granting permission for your contact information to be shared with NC TIDE, which is a joint provider of this education event.

Updated contact information.

NAME _____

CREDENTIALS _____

SOCIAL SECURITY # XXX-XX- ____ ____ ____ (last 4 digits required)

OCCUPATION _____

EMAIL ADDRESS _____

HOME ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

HOME COUNTY _____

HOME # _____ **WORK #** _____

EMPLOYER _____

DEPARTMENT _____

EMPLOYER'S ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

WORK COUNTY _____

Program announcements will be sent to your email unless you opt out from receiving emails from MAHEC. We never share our mailing lists.

Please remove my name from the MAHEC mailing list.

Please remove my name from the NC TIDE mailing list.

NC TIDE Cancellation Policy:

Registration fees, less a \$15.00 administrative fee, will be refunded if request is received by 5:00pm on April 5, 2018.

From April 6-11, 2018, refunds less a 50% cancellation fee will be honored at your request.

No requests for refunds will be accepted after 5:00pm on April 11, 2018.

Substitutions will be allowed upon request.

[REGISTER ONLINE](#)

YOU MUST SELECT THE BREAKOUTS ON THE PREVIOUS PAGE FOR EACH DAY THAT YOU WILL ATTEND AND SUBMIT WITH THE REGISTRATION FORM.

	DAY 1 After April 16 th	DAY 2 After April 16 th	DAY 3 After April 16 th
FEE:	<input type="checkbox"/> \$153 <input type="checkbox"/> \$178	<input type="checkbox"/> \$153 <input type="checkbox"/> \$178	<input type="checkbox"/> \$153 <input type="checkbox"/> \$178

FULL CONFERENCE:	<input type="checkbox"/> \$233	<input type="checkbox"/> \$258
GROUP: (All 3 days)	<input type="checkbox"/> \$233 /per person	<input type="checkbox"/> \$258 /per person

(Group: Five or more from same agency, registering and paying at same time. For every four conference registrations, the fifth one is free. One day registrations do not count toward the total registered. All registrations must be received at the same time. Groups MUST fax, scan/email, or snail mail registration forms to MAHEC.)

	DAY 1	DAY 2	DAY 3	ALL 3 DAYS
ONSITE REGISTRATION:	<input type="checkbox"/> \$178	<input type="checkbox"/> \$178	<input type="checkbox"/> \$178	<input type="checkbox"/> \$275

Total: _____

Full payment must accompany all submitted registrations unless a payment plan has been approved in advance. Registrations received without accompanying payment will not be processed.

Check is enclosed Credit card information provided
 Visa MasterCard Discover Card American Express

ACCOUNT # _____

EXP ____ / ____ **CODE ON BACK OF CARD** _____ (3 digits)

NAME ON CARD _____

SIGNATURE _____

Send completed registration form to: # 18MH038/55374
 MAHEC Registration
 121 Hendersonville Rd., Asheville, NC 28803 **Fax to:** 828-257-4768