



Jointly Provided by



NC TIDE FALL 2017 CONFERENCE: NAVIGATING THE FUTURE



OCTOBER 23-25, 2017

CROWNE PLAZA RESORT ASHEVILLE 1 Resort Drive | Asheville, 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 eighty conferences and trained thousands of individuals in the behavioral healthcare industry. NC TIDE sponsors two training conferences each year, one in the spring in Wilmington, NC and one in the fall in Asheville, NC. NC TIDE officers and committee members are all professionals in the behavioral healthcare industry who volunteer their time to carry forward the mission of the organization. The 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

AUDIENCE

- LME/MCO
- Care managers/coordinators
- Consumer and family members
- Mental health professionals, including substance use counselors, social workers, psychologists, marriage and family therapists, school counselors, peer support specialists, intellectual/developmental disability providers
- Other professionals and individuals interested in this subject
- Administrators
- Practice managers
- Human resources

PLATINUM SUPPORTERS

GOLD SUPPORTERS



SILVER SUPPORTERS



REGISTER FOR INDIVIDUAL DAYS OR ALL THREE!

Online registration is available at www.mahec.net

Early registration fees through October 11th:

Fee:	\$153/per day
Current NC TIDE Member:	\$203 (All 3 days)
New/Renewing NC TIDE Member:	\$233 (All 3 days)
<i>(Includes membership fee)</i>	
Group (Fifth person gets free registration):	\$233/per person (All 3 days)
<i>(Group: five or more from same agency, registering and paying at same time. Must use paper registration form)</i>	
Onsite Registration:	\$275 (All 3 days)

OBJECTIVES

- 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

Please see agenda pages for credit hours for individual days.

Mental Health Credits (NBCC & NC Psychologist) **ARE NOT** offered for the following Sessions: A1, A2, B3, C3, C4, C5, D3, D5, E1, E3, E4, F3, G3, G5 & H2.

No CE Credits are offered for the following Networking Sessions: B, C & D

NCSAPPB Credits are currently pending and will be updated as sessions are approved



NBCC: MAHEC and NC TIDE are co-sponsors of this program. This Co-sponsorship 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. **15.5 Hours (maximum)**

NCSAPPB: Application has been made for a combination of "General Skill Building" and "Substance Abuse Specific" credit from the North Carolina Substance Abuse Professional Practice Board. Full session attendance is required to receive credit.

CEU: The Mountain Area Health Education Center designates this entire continuing education activity as meeting the criteria for **1.6 CEUs (maximum)** as established by the National Task Force on the Continuing Education Unit. Full session attendance is required to receive credit.

Contact Hours: MAHEC designates this continuing education activity as meeting the criteria for **15.5 Contact Hours (maximum)**. 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. Full session attendance is required to receive credit from the NC Psychology Board. **15.5 Hours (maximum)**

Pre-registered participants can enjoy early check-in from 5pm-7pm on October 22nd.

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

For additional program information, please visit:
www.nctide.org

IMPORTANT HOTEL INFORMATION:

ROOM INFORMATION:

A block of 150 Rooms has been reserved for at the Crowne Plaza at a rate of \$139.00 per room plus tax on a first come first reserved basis. Please note the tax for Asheville is currently thirteen percent (13%).

RESERVATION:

Crowne Plaza Resort Asheville reservations office hours are Monday through Friday between 8:00am and 5:00pm. To book your reservation, call Crowne Plaza Resort Asheville and mention the group name **NC TIDE 2017** in order to receive the special group rate.

Resort Telephone – (828) 254-3211

Toll Free Reservations – (800) 733-3211 or (844) 330-0296
After the cut-off date (9/22/17), no reservations will be accepted at the special group rate.

Or book online at: www.ashevillecp.com

- Check Availability (enter dates of stay)
- Enter Group Code: TID
- [Click here](#) for a link you may use to automatically add the group code when booking online

GUEST ROOM CHECK-IN / CHECK-OUT TIME:

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

ADDITIONAL INFORMATION:

Additional Charges for Special Requests:
\$10.00 for each additional adult over two adults per room.

Accommodations must be guaranteed with a check or major credit card for the first night's stay. Individuals will be charged for one night if cancellations are not made at least 72 hours prior to arrival.

DIRECTIONS

Crown Plaza Resort Asheville
1 Resort Drive
Asheville, NC 28801

[Click here for directions](#)

Special Services: 828-257-4761

Have a Question?

CE Planner:

Scott Melton, M. Div.

MAHEC

828-257-4402

scott.melton@mahec.net

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

MONDAY, OCTOBER 23, 2017

REGISTRATION: 7:15am - 3:00pm

PROGRAM: 8:30am - 5:30pm

DAY ONE CREDITS:

MH NBCC	6.75 (maximum)
MH NCSAPPB	6.75 (maximum)
CEUs	0.7 (maximum)
Contact hours	6.75 (maximum)
MH NC Psychologists	6.75 (maximum)

7:45-8:30am CONTINENTAL BREAKFAST (*Exhibit Hall Opens*)

8:30-8:45am WELCOME (*Business Meeting*)

8:45-10:00am OPENING KEYNOTE

Behavioral Health and Opioids From the Secretary of DHHS

Dr. Mandy Cohen, Secretary of DHHS, will share the department's initiatives on behavioral health, integrated care, and the opioid crisis in North Carolina. Q/A to follow with the Secretary.

Mandy Cohen, MD, MPH

- Identify the priorities of DHHS and how they relate to behavioral health and the future
- Discuss integrated care and the Medicaid transformation to managed care
- Discuss NC's Opioid Action Plan
- Receive responses to your personal questions related to behavioral health from the Secretary

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

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

A1: GASB Other Postemployment Benefits: A Deep Dive and Recording of Fixed Assets and Depreciation

Please Note: This session does not qualify for NBCC or NC Psychology Credit

We will look into the required disclosures related to Other Postemployment Benefits for the actual plan and employer related to GASB 74 and 75. We will also be exploring when and how to record fixed assets and how to depreciate them.

Daniel Gougherty, BS, CPA

- Describe accounting and financial reporting requirements for the plan and employers related to Other Postemployment Benefits
- Explain how and when to record fixed assets and how fixed asset should be depreciated

A2: Developing Resilience in Turbulent Times

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Changes just keep coming: reorganizations, new systems, new processes, new funding models, new budget realities. If you're overwhelmed, you're in good company. If you're grinding through projects first and taking care of yourself last, let's talk. You can develop resiliency skills that help you thrive in today's turbulent environment.

Alix Felsing, MS

- Participants will evaluate their own perspective
- Identify sources of stress
- Create a personal resilience plan for thriving

A3: Opportunities and Challenges in Medication Assisted Treatment (MAT)

This round table presentation will include professionals working in programs that offer MAT. The audience will learn about MAT models, the effect of stigma against MAT, and effective strategies for ensuring people in MAT have access to community resources by addressing stigma and building partnerships.

Louis Leake, CSAC | Zac Talbott, CADCI, ICADC, CMA | Lisa Wheeler, MS Ed, PA-C

- Define the MAT continuum of care and models of care
- Identify ways to reduce stigma for patients seeking MAT
- Identify strategies that strengthen partnerships with the community for patients in MAT

A4: The NC Behavioral Health Crisis Referral System

This presentation will provide an overview of the new NC BH-CRIS web-based system available to a range of behavioral health providers at facilities serving individuals experiencing behavioral health crisis. The BH-CRIS will help inform policy, identify potential service needs, support education and provide technical assistance while allowing referring users to search for potential bed availability and communicate with receiving facilities that offer inpatient and facility-based treatment. BH-CRIS was developed based on research and discussions with potential users with ongoing input from an advisory committee made up of individuals from across the state with a range of roles in the systems involved. The session will include discussion on the legislative mandate behind the development and implementation of BH-CRIS and the guidelines and standards that will be part of the system. The two main goals of the new system include reducing the length of time individuals experiencing behavioral health crises must wait for placement in appropriate treatment facilities, and increasing the efficiency and timeliness of the placement process for both referring and receiving facilities. BH-CRIS is expected to be available to users statewide by the end of 2017.

Krista Ragan, MA | Sharlena Thomas, LPCS, LCAS, CCS | William Baker

- Identify the purpose of BH-CRIS and how it will impact behavioral health
- Describe how BH-CRIS works
- Define eligibility to use the system
- Identify ways to participate in the system

continued on next page

BREAKOUT SESSIONS CONTINUED

A5: Drinking, Drug Use and Addiction in the Autism Community

Recent studies suggest individuals with an autism spectrum disorder (ASD) diagnosis have a higher risk of developing a substance use disorder (SUD) than the general population. Social, educational, and vocational demands put those mainstreamed into middle/high school, college and typical work settings at risk for developing a SUD. This presentation will explore the potential protective and risk factors of an autism diagnosis in relation to developing an addiction to alcohol and/or illicit drugs. The presenters will also discuss the current research addressing the connections between ASD and substance use. With an expected 128% increase of individuals with an ASD currently entering into adulthood, this presentation will address individualized interventions for those with autism and the need for adapting current SUD assessments and treatment modalities to meet the needs of those with ASD.

Ann Palmer, BA | Elizabeth Kunreuther, MSW

- Identify the protective and risk factors of an autism spectrum diagnosis for developing a substance use diagnosis
- Utilize the terminology of substance use disorder, identify the indicators for a potential SUD, and effectively adapt assessment tools for substance abuse and dependence for individuals with an autism spectrum diagnosis
- Identify how to adapt effective SUD psycho-social treatment approaches to mesh with ASD treatment protocols such as schedule implementation and other structured teaching approaches

11:45-1:15pm

LUNCH (on your own)

1:15-2:45pm

BREAKOUT SESSIONS (choose one)

B1: Resources for Resilience

Communities and organizations are increasingly aware of the role that resilience plays in optimal health and wellbeing. Resources for Resilience is a trauma-informed and resiliency-focused curriculum that offers practical strategies to bring the nervous system back into balance after stress and trauma. The curriculum offers tangible skills derived from recent neuroscience that first help regulate the nervous system, then restore self-compassion from shame (resulting from actions taken or omitted when our nervous systems are out of balance), and ultimately create a basis for reconnecting with others in our families, workplaces and communities.

Mary Lynn Barrett, LCSW, MPH | Kate Goetz, LPC, LCAS | Ann DuPre Rogers, LCSW

- Analyze the biological impact of stress and trauma on the nervous system
- Integrate practical, effective skills for nervous system regulation

B2: Practice Guidelines in the Treatment of Adolescent Substance Use Disorders (SUDs): Part 1 of 2

Must attend both parts to receive credit

This training will review State Adolescent SUD and Recovery Practice Guide issues by the National Association of State Alcohol and Drug Abuse Directors.

Robert Werstlein, PhD

- Describe the 9 overarching principles of care
- Describe principles in the 4 service elements areas
- Produce examples in their practice of adherence to these principles

B3: Predictive Analytics...What's Next?

Please Note: This session does not qualify for NBCC or NC Psychology Credit

This presentation will focus on the emerging importance of organizations to leverage their data to perform Predictive Analytics from a higher-level perspective. We will look at industry trends and historical background leading us to future expectations in Predictive Analytics.

Chris Penrod, MBA, BSA, BSAE

- Define what Predictive Analytics is
- Describe the background of Predictive Analytics, what you need to get started and predict future applications
- Compare current tools and infer what may be next on the horizon

B4: Intellectual/Developmental Disabilities (IDD) and Traumatic Brain Injury (TBI): Similarities, Differences, and Resources

Individuals with an IDD and TBI have similarities and differences that can be challenging to differentiate when accessing or delivering appropriate services. IDD and TBI can significantly impact the person and surrounding support systems whether experiencing difficulties physically, cognitively, behaviorally, or emotionally. A higher quality of life, greater community participation and whole person care can be achieved through an understanding of TBI and the resources available.

Lauren Costello, MS, CRC, CBIS | Karen Keating, CBIS

- Identify the similarities & differences between characteristics of Intellectual/Developmental Disability and Traumatic Brain Injury
- Identify brain basics and the challenges following a brain injury
- Utilize effective strategies to assist individuals with TBI and IDD
- Explain and describe access to resources for individuals with Traumatic Brain Injury

B5: Confidentiality of Substance Use Disorder (SUD) Records: Changes to Federal Law 42 CFR 2

Presenter will discuss the 2017 changes to 42 C.F.R. Part 2, the federal confidentiality law governing SUD treatment records. Included will be an analysis of how the law and changes apply given some of the differences between the federal law and state confidentiality law.

Mark Botts, JD

- Describe the changes in federal law
- Apply changes in North Carolina in light of state law

2:45-3:00pm

BREAK (*Exhibitor Visitation*)

3:00-4:30pm

BREAKOUT SESSIONS (*choose one*)

C1: Documentary Film, *Resilience* (sequel to 2015, *Paper Tigers*): Part 1 of 2

Must attend both parts to receive credit

Resilience: Researchers have recently discovered a dangerous biological syndrome caused by abuse and neglect during childhood. As the new documentary *Resilience* reveals, toxic stress can trigger hormones that wreak havoc on the brains and bodies of children, putting them at a greater risk for disease, homelessness, prison time, and early death. While the broader impacts of poverty worsen the risk, no segment of society is immune. *Resilience*, however, also chronicles the dawn of a movement that is determined to fight back. Trailblazers in pediatrics, education, and social welfare are using cutting-edge science and field-tested therapies to protect children from the insidious effects of toxic stress—and the dark legacy of a childhood that no child would choose.

Ann DuPre Rogers, LCSW | Kate Goetz, LPC, LCAS | Mary Lynn Barrett, LCSW, MPH

- Examine the biological impact of stress and trauma on the nervous system
- Recognize the importance of creating trauma informed, resiliency focused systems of care
- Explain the connection between compassion, attachment, and healing

C2: Practice Guidelines in the Treatment of Adolescent Substance Use Disorders (SUDs): Part 2 of 2

Must attend both parts to receive credit

Part 2 of Session B2.

Robert Werstlein, PhD

C3: Provider Reimbursement Rate Development

Please Note: This session does not qualify for NBCC or NC Psychology Credit

There are several ways to determine provider reimbursement rates. MCOs do not want to overpay, but offer a competitive/adequate rate for services provided. Providers do not want to accept a rate that will not cover their cost. What is an appropriate rate? This session will review rate setting methodologies that are applicable to both MCOs and providers.

Niels Eskelsen, MBA

- Identify key indicators for MCOs to determine cost and value in determining provider pay rates
- Utilize methodologies that can be used by providers and MCOs to determine appropriate reimbursement rates

C4: Value-Based Care Analytics

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Across healthcare, organizations strive to transform the business and delivery of care for greater value. Value-based care analytics play a central role in this transformation. Learn how value-based care analytics deliver innovation designed to help drive value for providers and healthcare organizations as those providers and organizations work to manage population health, deliver more efficient care, engage patients and consumers, and harness the power of data-driven insights to optimize business performance.

Nick Behrends, BS, MBA | Thomas Nisbet

- Define the key components of an effective value-based care analytics strategy that can improve quality and create value
- Describe data integration and aggregation, risk-stratified analytics, performance measurement reporting, care management and patient engagement capabilities
- Apply value-based care analytics to: measure clinical, financial, operational and market metrics to align quality initiatives and optimize reimbursement; anticipate and address actuarial and clinical risk by using data to understand community needs; and personalize care at scale, while giving valuable time back to staff

C5: Leading through Change Intelligently

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Change is a constant in our lives and business. In fact, we all live in a “permanent whitewater” change environment. This is even more the case in today’s business world. Yet, statistics show that up to 70% of all change initiatives fail! If you have ever led a change initiative that has had “lackluster” success despite significant planning and stellar efforts you have probably been left wondering, “What does it take for change to be successful?” Is your organization struggling in the current economy, forced to make changes no one wants to make? Are you tired of “program of the year” and want to know how to make change stick? Are you frustrated by your inability to overcome resistance to new ways of working?

Jeanne Pritt, MSOD, SPHR, SHRM-SCP, CQA

- Identify positive change in current economic challenges
- Utilize methods to ensure programs succeed
- Apply strategies to overcome resistance to change

4:30-5:30pm

NETWORKING SESSIONS (*choose one*)

A: Q/A and Panel Discussion: Trauma, the ACE Study, and Resilience: Part 2 of 2

Must attend both parts to receive credit

Part 2 of Session C1.

Audience and presenters will have an opportunity to ask questions and share ideas about trauma, resilience, and creating “resiliency-informed” communities.

Ann DuPre Rogers, LCSW | Kate Goetz, LPC, LCAS | Mary Lynn Barrett, LCSW, MPH

- Examine the biological impact of stress and trauma on the nervous system
- Recognize the importance of creating trauma informed, resiliency focused systems of care
- Explain the connection between compassion, attachment, and healing

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BREAKOUT SESSIONS CONTINUED

B: Provider Networking

Please Note: This session does not qualify for CE Credit

C: MCO Networking

Please Note: This session does not qualify for CE Credit

D: CFAC Networking

Please Note: This session does not qualify for CE Credit

5:30pm **ADJOURN**

TUESDAY, OCTOBER 24, 2017

REGISTRATION: 7:45am - 3:00pm

PROGRAM: 8:30am - 4:45pm

DAY TWO CREDITS:

MH NBCC	6.00 (maximum)
MH NCSAPPB	6.00 (maximum)
CEUs	0.6 (maximum)
Contact hours	6.00 (maximum)
MH NC Psychologists	6.00 (maximum)

7:30-8:30am **CONTINENTAL BREAKFAST** (*Exhibit Hall Opens*)

8:30-10:00am **BREAKOUT SESSIONS** (*choose one*)

D1: Health Information Exchange (HIE): Impact on the Behavioral Health and Intellectual/Developmental Disability (IDD) System

The presentation will provide an update on HIE implementation in NC and discuss the impact of HIE on the clinical and business practices of the LME/MCOs and the providers. The session will also identify strategies to prepare for HIE.

Tara Larson, EdS

- Define the current status of HIE implementation in NC
- Identify business and clinical work flows to incorporate results of obtaining information through the HIE
- Identify agency planning and change management steps for successful HIE implementation

D2: Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change: Part 1 of 2

Must attend both parts to receive credit

Staff will be oriented to *Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change* by Kenneth Wanberg and Harvey Milkman. This curriculum is divided into three phases, (1) Challenge to Change, (2) Commitment to Change, and (3) Taking Ownership of Change.

Robert Werstein, PhD

- Articulate the similarities and differences between criminal conduct and SUD
- Compare criminal and addictive thinking
- Describe CBT methods effective with SUD and criminal conduct
- Describe risk factors that correlate with criminal behavior
- Identify targets for change

D3: Coaching and Mentoring Skills for Leadership Success

Please Note: This session does not qualify for NBCC or NC Psychology Credit

This session addresses the current trends of developing "leadership capabilities" within organizations by the use of experienced leaders. We will review the differences between 'coaching' and 'mentoring' approaches to developing leaders. We will introduce and explore the 'habits' of highly successful mentors and mentorees. As we review the habits, you will see how a mentoring program can work to develop staff, how it will strengthen your organization, and how it can impact others as they view and respond to the transference of ideas and skills. Leadership traits and functions will be reviewed, along with helpful tips and suggestions for being more successful as a 'leader.' Join us to learn new ways to develop leaders in your organization. Leaders aren't born, they are made. By treating people like leaders and sharing with them the keys, the how, and the why, they can succeed in your system.

Kim Newsom | Mel Crocker

- Identify leadership traits and functions
- Describe differences between 'coaching' and 'mentoring' as it relates to leadership development
- Indicate who can benefit from being a mentor or a mentee and how it may further develop them
- Assess the 'habits' of successful mentors and mentorees
- Develop ideas and examples reflecting the impact of mentoring on the organization and its employees
- Utilize skills to develop new leaders through the use of mentoring

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BREAKOUT SESSIONS CONTINUED

D4: Children with Complex Needs: What You Need to Know

This session reveals key indicators driving North Carolina to work collaboratively with stakeholders to improve Mental Health (MH) and Intellectual/Developmental Disability (IDD) systems to increase access to services and supports for individuals with MH/IDD and complex needs. Participants will learn how to better navigate our system and overcome identified challenges. Participants will gain opportunities to expand awareness on how to better support the needs of children who are dual diagnosed with MH/IDD and complex needs. Shared updates will provide a sense of direction for services in NC.

Mya Lewis, MHA | Pam Kuhno, BA | Nicole Cole, LPC, NCC

- Describe the background history driving changes for individuals with MH/IDD and complex needs
- Determine the criteria for assessing a child who is dually diagnosed with complex needs
- Identify steps to access services and supports for children with complex needs in the community
- Examine opportunities and challenges that exist within our system
- Discuss key factors in the future direction of services

D5: Interrelationship Diagrams: Looking for Causes in all the Right Places

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Facing complex problems with multiple causes or potential drivers for outcomes can be challenging. We often get lost in how forces tie together and miss key leverage points. Interrelationship diagrams can be used to map relationships focusing on a particular problem and discovering root causes or key drivers that can uncover critical points for bringing about change.

Dale Roenigk, PhD

- Identify the core features of an Interrelationship Diagram
- Determine the construction and use of Interrelationship Diagrams with problem solving and root cause analysis

10:00-10:30am

BREAK (*Exhibitor Visitation*)

10:30-12:00pm

BREAKOUT SESSIONS (*choose one*)

E1: Penalties, Incentives, Oh My: Pay for Performance & Value-Based Contracts Trickle Down to MCOs and Providers

Please Note: This session does not qualify for NBCC or NC Psychology Credit

"Pay for Performance" (P4P) is the current hot topic again. From the new Center for Medicaid and Medicare Services (CMS) "MegaRegs," political pressure, evolution of Medicaid managed care, or simple economics; the trend is unmistakable. Contracting is becoming more value-based. Revenues have become harder to predict because performance requirements are tied to payments being added to contracts, even capitated, full at-risk contracts. CMS empowers states to require performance measures of the LME/MCOs, who logically ensure their network providers are in lock-step to meet those measures. Quality of care is always a priority, so why not incentivize it in the provider payment model? The issue becomes how: Carrot, stick, or some hybrid? What data and measures are most feasible, valid and effective for what outcomes? Join a session that looks at the changing landscape of Medicaid managed care contracting, from policy and law to specific clauses, measures and examples.

Andrew Walsh, Esq., JD, MBA | Elizabeth Lackey, MSW, LCSW

- Identify the CMS "MegaRegs" state about pay-for-performance contracting
- Identify "performance measures" imposed on NC LME/MCOs that might trickle down to providers
- Assess actual and theoretical contracts including clauses, measures and possible issues for provider contracts
- Debate what does and does not make sense in payments tied to performance and value measures
- Utilize helpful resources, including reference materials, for use in your post-conference professional careers

E2: Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change: Part 2 of 2

Must attend both parts to receive credit

Part 2 of Session D2.

Robert Werstlein, PhD

E3: A Review of DMH Produced Claim and Encounter Extracts and Reports

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Each week, DMH produces a series of extract files based on both DMH and DMA claims where the LME/MCO is the billing provider and on MCO submitted Medicaid encounters adjudicated in NCTracks. The presentation will review the content and structure of the files in order to assist LME/MCO in utilizing them to better meet their business needs. We will also review the associated summary reports that are distributed each week.

Adam Holtzman

- List the content and structure claims files
- Utilize claims files and reports to meet varied needs

E4: Nominal Group Technique (NGT): Looking for Consensus

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Problem solving with a group is frustrating when the group is unable to find consensus about the questions, the problem, or the solution. NGT is a group process involving problem identification, solution generation, and decision making. NGT won't solve all problems but it can make it clear when there is consensus, when disagreements are evident and where the group can focus discussions on differences to find understanding and possible ways forward.

Dale Roenigk, PhD

- Identify the process of NGT
- Utilize NGT skills for group facilitation

BREAKOUT SESSIONS CONTINUED

E5: Rethinking Guardianship: Building a Case for Less Restrictive Alternatives

This presentation will address how the Collective Impact Model is being used to effect change in the state's adult guardianship system so that individuals with disabilities can more fully exercise their right to make their own decisions. Through a grant from the North Carolina Council on Developmental Disabilities, the "Rethinking Guardianship: Building a Case for Less Restrictive Alternatives" initiative has used data and stories to drive the priorities and actions of a diverse and passionate stakeholder group to: (1) create long-term changes in the state's guardianship system, (2) promote less restrictive alternatives to guardianship, and (3) demonstrate change in the guardianship system of a pilot community in North Carolina.

Linda Kendall Fields, MEd

- Describe adult guardianship in North Carolina and the individuals affected by guardianship
- List the goals and actions of NC's "Rethinking Guardianship" initiative
- Identify how the Collective Impact Model is being used to facilitate changes in the adult guardianship system
- Examine the use of less restrictive alternatives, such as Supported Decision-Making
- Apply the information and tools presented in the session to their own personal and professional experiences

12:00-1:30pm

LUNCH (*on your own*)

1:30-3:00pm

BREAKOUT SESSIONS (*choose one*)

F1: Relapse Prevention Cognitive Behavioral Therapy (CBT): Part 1 of 2

Must attend both parts to receive credit

Relapse Prevention Therapy (RPT) is a National Registry of Evidence-Based Programs and Practices (NREPP) Substance Abuse and Mental Health Services Administration (SAMHSA) evidence-based behavioral self-control program that teaches the client how to anticipate and cope with the potential for relapse.

Robert Werstlein, PhD

- Implement RPT in substance abuse outpatient and/or aftercare treatment environments
- Describe coping skills training
- List ways to support clients in identifying relapse as a process
- Describe ways to identify and cope effectively with high risk situations such as negative emotional states, interpersonal conflict, and social pressure
- Apply strategies to help clients cope with urges and cravings
- Implement damage control procedures during a lapse to minimize negative consequences
- Identify ways to help clients stay engaged in treatment even after a relapse
- Utilize RPT to assist clients in creating a more balanced lifestyle

F2: Opioid Exposed Pregnancies and a Plan of Safe Care: Child Abuse Prevention and Treatment Act

National attention to the increase in the numbers of infants that are born having been exposed to opioids has resulted in updated federal legislation under the Child Abuse and Prevention Treatment Act or CAPTA. Family-centered supports are to be provided, as a 'Plan of Safe Care,' for infants born identified as 'affected by substance abuse.' Implementation in North Carolina will be discussed, including the categories of exposure that will result in a required 'Plan of Safe Care.' Differentiation between a Safety Assessment, done by Child Welfare Professionals and a Plan of Safe Care will be discussed. Universal referrals to the public health Coordinated Care for Children (CC4C) will be discussed, in addition to the Women's Gender Responsive Substance Use Disorder Treatment programs for women who are pregnant and their children.

Starleen Scott-Robbins, MSW, LCSW | Belinda Pettiford, MPH | Jessica Guice Albritton, MSW | Melissa L. Godwin, MS, LCSW

- Discuss new federal requirements related to infants identified as 'affected by substance abuse'
- Define what it means for an infant to be 'affected by substance abuse, withdrawal or Fetal Alcohol Spectrum Disorders (FASDs)'
- Identify updated state policies regarding substance exposed newborns
- Identify how to connect pregnant and parenting women to substance use disorder treatment

F3: Performance Improvement Projects (PIPs): Using PIPs to Strengthen Decision Making Around Quality

Please Note: This session does not qualify for NBCC or NC Psychology Credit

The purpose of this presentation is to guide participants through the Center for Medicaid and Medicare Services (CMS) mandated PIP approval process and to help them understand the importance of PIPs and how it influences managed care.

Adolph Simmons, MS

- Identify the importance of PIPs and their influence on managed care
- Describe the CMS PIP approval process

F4: Fraud and Fraud Prevention: The Legal Perspective

This presentation will focus on the legal aspects of fraud and fraud prevention for Medicaid behavioral providers and the statutory and regulatory responsibilities of LME/MCOs to combat fraud, waste and abuse. The presentation will review the administrative, civil and criminal remedies available to the state and LME/MCOs when fraud occurs.

Tracy Hayes, JD

- Relate the legal aspects of fraud and fraud prevention for behavioral health Medicaid providers
- Utilize specific information of the legal responsibilities to prevent, detect and deter fraud, waste and abuse for the LME/MCO in the Medicaid program

continued on next page

BREAKOUT SESSIONS CONTINUED

F5: Supported Living: Making a Difference

Vaya Health was selected for the “Supported Living – Making a Difference” grant opportunity through the NC Council on Developmental Disabilities and the Money Following the Person Initiative with the Division of Medical Assistance. Vaya is partnering with Lynne Seagle of Hope House Foundation, Derrick Dufresne of Community Resource Alliance, the National Leadership Consortium on Developmental Disabilities at the University of Delaware, The Arc, Liberty Corner Enterprises, FIRST, and Turning Point Services to move a minimum of 24 persons into the community using the Supported Living definition in the NC Innovations Waiver and track their progress over the course of three years. Vaya offered a Supported Living kick-off conference in March that was the beginning of development of a learning community to inform use of the service throughout the state. This presentation will provide an overview of steps taken, lessons learned, and future plans.

Lynne Seagle, MS | Jesse Smathers, MSW, LCSW-A, LCAS-A

- Describe the goals of the Supported Living: Making a Difference Initiative
- Identify barriers to an increased use of Supported Living
- Identify practices to overcome barriers in the use of Supported Living

3:00-3:15pm

BREAK (Exhibitor Visitation)

3:15-4:45pm

BREAKOUT SESSIONS (choose one)

G1: Relapse Prevention Cognitive Behavioral Therapy (CBT): Part 2 of 2

Must attend both parts to receive credit

Part 2 of Session F1.

Robert Werstlein, PhD

G2: A Look in the Supervisor Mirror

This session will focus on the roles and responsibilities of a supervisor, some behavioral traits of both highly successful and not so successful supervisors, several different styles of leadership along with the effective utilization of each, and the transition from worker to supervisor. It will afford an opportunity for self-assessment to identify the participant's dominant leadership style and possibly some behavioral traits that may be limiting their full potential as a supervisor. There will be discussion of ways to hone and fine tune skills necessary to carry out supervisory responsibilities.

Mel Crocker | Kim Newsom

- Identify changes that occur when one moves from worker to a supervisor position
- Describe the different roles and responsibilities for which a supervisor is responsible
- Summarize the behavioral traits found in both good and not so good supervisors
- Recognize different leadership styles and the appropriate application of each
- Identify ways in which supervisory skills may be strengthened

G3: Negotiation 101: Revisiting Getting to YES

Please Note: This session does not qualify for NBCC or NC Psychology Credit

The session will consist of two parts: first, a brief overview of basic negotiating principles with the second part applying related exercises. This session is based on the concepts presented by Roger Fisher and William Ury in their book *Getting to YES*.

Niels Eskelsen, MBA | Andrew Walsh, Esq., JD, MBA

- Identify basic principles of negotiation
- Demonstrate techniques to use a mutual interest based style of negotiation

G4: Involuntary Commitment Law (IVC): Potential Changes and Current Issues

Presenter will discuss Senate Bill 630 (eligible for consideration in 2018), how it would change IVC law and why. Included will be an analysis of current issues in IVC law, policy, and practice. Time will be allotted for questions and answers on any IVC topics that the audience wishes to address.

Mark Botts, JD

- List potential changes in state IVC law and why those changes are being proposed
- Identify, discuss, and problem solve current issues in IVC law and practice

G5: Spreadsheet Fundamentals (Excel 101)

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Instructional course to introduce data analysis and data visualization tools in Excel. Course activities include demonstration of basic Excel features, including: sort, formatting, formulas, and charts. Course content applies to data within a healthcare context.

Nick Behrends, BS, MBA

- Identify foundational techniques and tools to analyze, describe, and visualize data in Excel

4:45pm

ADJOURN

continued on next page

WEDNESDAY, OCTOBER 25, 2017

REGISTRATION: 7:45am - 10:00am

PROGRAM: 8:45am - 12:00pm

DAY THREE CREDITS:

MH NBCC	2.75 (maximum)
MH NCSAPPB	2.75 (maximum)
CEUs	0.3 (maximum)
Contact hours	2.75 (maximum)
MH NC Psychologists	2.75 (maximum)

7:45-8:45am CONTINENTAL BREAKFAST

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

H1: Moving from Programs to Supports: Stories of the Community

In this presentation, Lynne Seagle, Executive Director of Hope House Foundation, shares her agency's journey of closing their group homes and moving from providing programs to supporting people to live truly individualized lives. Lynne's session is delivered with humor and learning that is transferable to all populations within the human services industry. Lynne connects her stories to basic principals that have guided Hope House Foundation and the staff they employ. This agency has received a number of national awards for their work, specifically in the areas of inclusion, creativity in fundraising, and safe and affordable housing.

Lynne Seagle, MS

- Describe how a service delivery agency can adapt to the needs of the people they support
- Explain ways that people can get supports they need where they live, regardless of changes in behavior, health, or other circumstances
- Discuss how services can be flexible, therapeutic, creative, and innovative
- Explain ways to value individual choice through service delivery
- Discuss ways that service providers can help persons create thriving community lives that include satisfying relationships with friends and family
- Discuss ways that services and living environments can be designed and modified to fit unique needs of individuals

H2: Common Mistakes in MCO/Provider Communication

Please Note: This session does not qualify for NBCC or NC Psychology Credit

Attendees will learn the common mistakes made in communication between the provider and the LME/MCO. With advances in our communication devices, clear communication between the provider and LME/MCO should become paramount. This presentation will identify and detail common mistakes made in our everyday phone calls and emails between provider and LME/MCO correspondence. Work group sessions will facilitate attendees practicing skills.

LaKisha Perry-Green, BA, MS, MBA

- Attendees will formulate how to improve correspondence that will positively affect the relationship between the provider and the LME/MCO

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. The Deputy Secretary will cover recent policy issues, legislative issues, budget issues, and discuss how these will affect the future direction of behavioral health in North Carolina. Time will be allowed after the presentation for questions from participants.

Dave Richard, BS

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

11:45-12:00pm CLOSING REMARKS/DOOR PRIZES

12:00pm ADJOURN

OPENING KEYNOTE



MANDY COHEN, MD, MPH

Mandy Cohen and her team have worked tirelessly to improve the health, safety and well-being of North Carolinians since being appointed as Secretary of the N.C. Department of Health and Human Services in January. Among her top priorities are combating the opioid crisis, building a strong, efficient Medicaid program, and improving early childhood education.

Secretary Cohen has called on clinicians across the state to assist in fighting the opioid epidemic by screening patients for risk or presence of opioid use disorder, connecting them with evidence-based treatment and using prescribing software, as well as registering with the N.C. Controlled Substance Reporting System to review patient prescription histories. In May, she began a multi-city tour of listening sessions to hear feedback from residents on Medicaid and NC Health Choice transformation.

Cohen is an internal medicine physician and has experience leading complex health organizations. Before coming to the North Carolina Department of Health and Human Services she was the Chief Operating Officer and Chief of Staff at the Centers for Medicare & Medicaid Services (CMS). She brings a deep understanding of health care to the state and has been responsible for implementing policies for Medicare, Medicaid, the Children's Health Insurance Program and the Federal Marketplace.

A graduate of Cornell University, she received her medical degree from Yale School of Medicine, a master's in Public Health from the Harvard School of Public Health and trained in Internal Medicine at Massachusetts General Hospital.

Dr. Cohen is married to Sam Cohen, a health care regulatory lawyer, and has two daughters.

CLOSING PLENARY



DAVE RICHARD, BS

Dave Richard is the Deputy Secretary for the Division of Medical Assistance (DMA), where he leads North Carolina's \$13.5 billion Medicaid program for the state's Department of Health and Human Services (DHHS). In his role as DMA Deputy Secretary, Mr. Richard's vision is to ensure a sustainable Medicaid program for the North

Carolina Medicaid beneficiaries that is person-centered, innovative and cost effective. As North Carolina transforms its Medicaid program, he is committed to the fundamental goal of improving the health of the two million North Carolina Medicaid beneficiaries. He believes the best mechanism for achieving success is to actively engage stakeholders as partners in all aspects of the program.

NATIONAL PRESENTERS



TARA LARSON, EdS

Tara Larson has over 35 years of experience in the healthcare field as a practitioner, administrator and senior executive, serving as Senior Deputy Director of NC Medicaid, Interim Director of NC Medicaid and Deputy Director of NC Division of MH/IDD/SU. Ms. Larson's publications and presentations are in the areas of: Medicaid, managed care, behavioral health and primary care integration, quality management, program integrity, consumer directed supports, healthcare operations, and women's issues. She continues to serve on various state and federal committees, chairing workgroups and advising on healthcare policy in NC and across the country.

Upon her February 2013 retirement from the NC Department of Health and Human Services, she joined Cansler Collaborative Resources as Senior Healthcare Policy Specialist. Current clients include nationally recognized analytics companies, national consulting companies, community behavioral health and IDD providers (national and state based), community health systems, federally recognized Tribes, trade associations, and non-profits agencies.



LYNNE SEAGLE, MS

Lynne Seagle began her career at Hope House Foundation in 1978 as Director of Residential Services, and has been our Executive Director for more than three decades. Prior to joining Hope House, she was a special education teacher. And throughout college, she worked as Direct Support Staff for the Arc of Tidewater, which later merged its services with Hope House.

Under Lynne's leadership, Hope House has become internationally known for its innovative, person-centered approach. One of her proudest accomplishments was guiding us through our transition from group homes to supporting people in their own apartments in the early Nineties.

In 1986, Lynne was honored as the Virginia Administrator of the Year by the Virginia Community Living Association (CLAMR), and also received an Innovation Award from the same organization. In 1990, she received the Leadership Award from the American Association on Intellectual Disabilities, and in 1998, she received the Joseph P. Kennedy Foundation's International Future Leader Award. In 2011, she was appointed to the Arc of Virginia's Board of Directors. She has also served on the President's Commission on Intellectual Disabilities and is on the Advisory Board of the Joseph P. Kennedy Foundation.

Lynne is in great demand as a consultant and speaker on the topics of organizational and leadership development, strategic planning, and team-building, both nationally and internationally. She offers these services to local non-profits at no charge or a very reduced rate. She holds a bachelor's degree in Special Education and a master's degree in Public Administration and Educational Leadership, both from Old Dominion University.

Lynne is passionate about social justice and equality for all people, particularly those with intellectual or developmental disabilities. She also enjoys reading, travel, Mexican cuisine, and the beach.

FACULTY

William Baker

William Baker is currently the Team Leader for Behavioral Health Patient Placement with Carolinas Healthcare System. He received bachelor's degrees in Finance and Mathematics at High Point University and is currently working on masters degrees in Healthcare Administration and Healthcare Informatics. After his twenty-year career working his way up from agent to Call Floor Director within the Call Center environment, he shifted his focus to Behavioral Health after experiencing the Behavioral Health crisis first-hand with a family member. William has been with Carolinas Healthcare System now going on six years and has worked closely with the emergency department, inpatient and outpatient units, and now patient placement. He is active in his community and currently an Ambassador and President's List member of Capella University; a member of the CHS Team Teal, an employee advocacy group; a member of Equality ONE; and various other associations. He lives in Charlotte with his partner, Jason, and says of his two toddler granddaughters, "they rejuvenate me everyday."

Mary Lynn Barrett, LCSW, MPH

Mary Lynn Barrett is the Director of Behavioral Medicine in the Family Practice Residency Program and clinic at the Mountain Area Health Education Center in Asheville, NC. She is very interested in the relationship between stress and trauma and chronic disease and is passionate about disseminating information about the Adverse Childhood Experiences Study along with resiliency skills so that systems, agencies and individuals can become more trauma and resiliency informed and promote well-being for all.

Nick Behrends, BS, MBA

Nick Behrends works for IBM as a strategy and analytics management consultant. He primarily advises public sector healthcare payer clients. Mr. Behrends' retains 10+ years of experience consulting for Medicaid and MCO's here in North Carolina. His expertise spans big data and analytics, business intelligence, cognitive technologies and organizational transformation.

Mark Botts, JD

Mark Botts is an associate professor of public law and government in the School of Government at The University of North Carolina at Chapel Hill. He specializes in mental health law and provides training, consulting, and publications for mental health professionals, consumers of services and their family members, employees and administrators of public mental health agencies, judicial officials, law enforcement officers, county commissioners, mental health authority board members, and other public and private officials and employees responsible for the management and delivery of mental health, developmental disabilities, and substance abuse services in North Carolina. Subjects within his expertise include civil commitment, confidentiality, client rights, psychotherapist liability, as well as the governance, finance, and administration of public mental health services. At the request of legislators and other public officials, Mr. Botts has drafted legislation amending North Carolina state law governing the confidentiality of mental health records, involuntary commitment, advance directives for mental health treatment, and the organization, administration, and governance of public mental health authorities.

Nicole Cole, LPC, NCC

Nicole Cole is a Project Manager on the Systems Performance Team at the Division of Mental Health, Developmental Disabilities and Substance Abuse Services managing the Children with MH/IDD and Complex Needs project and all of Crisis Services projects across the state. Prior to her current role, Nicole worked on the customer service and community rights team for three years. Nicole is a Licensed Professional Counselor and a Nationally Certified Counselor who has owned her own mental health therapy practice for the last six years seeing children, adolescents, and adults. Prior to her work at the state level, she was also a Clinical Director and Performance Quality Improvement Coordinator for a mental health, IDD and foster care provider agency. She received her master's degree in Counselor Education at North Carolina Central University and her bachelor's

degree in Psychology and minored in Spanish at the University of North Carolina at Chapel Hill. She is very passionate about topics including the dually diagnosed (MH/IDD) population, mental health, intellectual and developmental disabilities, Autism Spectrum Disorder, human trafficking, and developing educational trainings and presentations.

Lauren Costello, MS, CRC, CBIS

Lauren Costello is the Central Resource and State Training Coordinator at the Brain Injury Association of NC. She received dual bachelor's degrees from Virginia Tech in Biological Sciences and Psychology and received her master's degree from the University of North Carolina at Chapel Hill in Clinical Rehabilitation and Mental Health Counseling. She has worked with individuals with brain injury and mental health in hospital and community settings. She is a certified rehabilitation counselor and brain injury specialist.

Mel Crocker

Mel Crocker provided and managed a comprehensive array of HR services to a variety of state and local human service agencies for over 32 years before retiring as a human resources director from the NC Department of Health and Human Services. Prior to and following his retirement, Mr. Crocker has been a regular contributor to FARO and NC TIDE training conferences.

Ann DuPre Rogers, LCSW

Ann DuPre Rogers is the Provider Relations Manager at Vaya Health. She has worked in outdoor leadership, community mental health, school based mental health, and community education. Her roles have included school social worker, child and family therapist, field instructor, clinical supervisor, school-based mental health program administrator, and community outreach director. She is also a registered yoga teacher and a Mental Health First Aid instructor, and has had the privilege to teach many audiences about trauma, compassion and resiliency.

Niels Eskelsen, MBA

Niels Eskelsen is currently serving as the Chief Business Officer for Partners Behavioral Health Management. Niels came to North Carolina as the CFO and Director of Business Operations for PBH (Cardinal Innovations) from July 2005 to September 2010. Prior to PBH, Niels was a senior 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, provider network development, reimbursement and monitoring, performance indicator development and dashboard reporting, utilization of clinical data in service management, incentive compensation programs, and other related topics.

Alix Felsing, MS

Alix Felsing is an organization development consultant, teacher, and executive coach. She is interested in resilience, career derailment, and strategies for thriving amid rapid and ongoing change. Alix teaches business communication, resilience, and journaling. Alix holds a master's degree in organization development and a coaching certificate from Queens University of Charlotte, and a bachelor's degree in journalism from Michigan State University.

Melissa L. Godwin, MS, LCSW

Melissa Godwin is a clinical social worker who has a Clinical Assistant Professor appointment at UNC Chapel Hill School of Social Work. She has provided women's gender responsive substance abuse services, technical assistance, and training in North Carolina since 2004, under the auspices of NC DMH/DD/SAS. Her current role at UNC Chapel Hill is based on a contract with NC DMH/DD/SAS, serving as the Work First/Child Protective Services Substance Use Initiative Coordinator since 2007, in addition to continuing her work around women and substance use disorders.

FACULTY CONTINUED...

Kate Goetz, LPC, LCAS

Katie Goetz is the Service Manager of the Recovery Education Centers at Meridian Behavioral Health Services where she works as a supervisor and therapist with those recovering from mental illness and substance abuse challenges. Katie also oversees Meridian's whole person care projects and initiatives. Katie has had the opportunity to teach resiliency skills in her community, to consumers, and to staff in all roles at Meridian "to encourage individuals to integrate wellness skills into their daily life."

Daniel Gougherty, BS, CPA

Dan Gougherty is an Audit Manager in the Charlotte practice of Cherry Bekaert. He has 10 years of accounting and auditing experience, and he has experience in meeting the accounting and advisory needs of clients in several industries, including state and local governments, higher education, and not-for-profit.

As a member of the firm's not-for-profit and government industry groups, Daniel serves as the engagement manager on a variety of state and local governments and educational institutions, including private universities and community colleges. Daniel is experienced in applying the technical accounting and audit issues within the government and education industries.

Jessica Guice Albritton, MSW

Jessica Guice Albritton has almost a decade of experience in child welfare. She has been with the North Carolina Division of Social Services (NC DSS) since 2016 and serves as a Policy Consultant with the Child Welfare Section. During this time, Jessica has been instrumental in developing and writing policy that addresses the needs of infants with prenatal substance exposure and brings the state into compliance with federal legislation.

Prior to her position with NC DSS, Jessica was a Child Welfare Supervisor with Durham County Department of Social Services. In that role, she provided supervision to a team of child protective services social workers who conducted family assessments and forensic investigations of child abuse, neglect and dependency.

Jessica received her MSW from the University of Maryland School of Social Work and a BA in Journalism and Mass Communications from the University of North Carolina at Chapel Hill.

Jessica lives in Carrboro, NC with her husband, three kids and a precocious bulldog.

Tracy Hayes, JD

Tracy Hayes served as General Counsel for Alliance Behavioral Healthcare and as a Special Deputy Attorney General at the North Carolina Department of Justice, where she represented the Department of Health and Human Services in a wide variety of federal and state administrative, legislative, regulatory and litigation matters, including two federal class action lawsuits and dozens of actions against health care providers to recover overpayments based on waste or abuse of Medicaid funds prior to joining Vaya Health. Ms. Hayes continues to serve as a certified instructor for the National Attorneys General Training and Research Institute (NAGTRI) on trial advocacy, deposition skills, motions practice, negotiation skills and advanced trial techniques, and provides training to Attorney General Offices throughout the United States and its Territories. She is licensed to practice in North Carolina (active) and Louisiana (inactive). Ms. Hayes is a graduate of New College of Florida and Tulane Law School.

Adam Holtzman

Adam Holtzman has worked as a statistician and analyst for the Division of MH/DD/SAS for the past 25 years. Among other duties, he produces weekly claim and encounter extracts and reports for the LME/MCOs from NCTracks.

Karen Keating, CBIS

Karen Keating is the Western Training & Resource Coordinator for the Brain Injury Association of North Carolina in Asheville. Karen has a son who sustained a traumatic brain injury at age 16 due to a car accident. Once finished with therapies for her son, Karen realized the lack of resources in the community and became active with the Brain Injury Association of NC. Karen is a strong and passionate advocate for brain injury survivors, both statewide and nationally. Karen served on the board of directors for the North Carolina Brain Injury Association until the opening of the Resource Center in 2006. She currently serves on the board for Hinds Feet Farm, a day program for brain injury survivors, which through her dedication was able to help open its second program in Asheville, July 2009. She is also a certified brain injury specialist. Karen lives in Asheville with her husband Larry and enjoys hiking, scuba diving and traveling.

Linda Kendall Fields, MEd

Linda Kendall Fields is a Clinical Assistant Professor with the Jordan Institute for Families at the University of North Carolina School of Social Work in Chapel Hill. She has dedicated over 30 years to building communities that are responsive to the needs and contributions of older adults, people with disabilities and families in Minnesota, Oregon, Ohio, Georgia and North Carolina.

During her career, Linda has led numerous government and healthcare initiatives aimed at supporting individuals and families living in the community and transitioning to the community from facilities.

In her capacity at UNC Chapel Hill, she is facilitating the state's Adult Network of Support Initiative, which includes Creating Dementia Capable Communities and Rethinking Guardianship: Building the Case for Less Restrictive Alternatives.

Pam Kuhno, BA

Pam Kuhno has worked to support people with intellectual and developmental disabilities since her career in the field began in 1992 representing families in Special Education matters in Pennsylvania. She went on to work for Disability Rights Pennsylvania for a number of years, monitoring a federal settlement agreement regarding community placement for people residing in a state center, and establishing a disability rights advocacy team which worked for people living in state centers throughout Pennsylvania. She then worked for the Pennsylvania Department of Human Services in the Office of Developmental Programs in roles managing both community and ICF/IID services. She has been in North Carolina working as the Director of Murdoch Developmental Center since 2012.

Elizabeth Kunreuther, MSW

Elizabeth Kunreuther has worked in the developmental disabilities field off and on for close to twenty years. Elizabeth served as the Intake Coordinator for the University of North Carolina's TEACCH Autism Program for over ten years. After receiving her master's in Social Work, Elizabeth continued to work in the field of developmental disabilities as well as mental health and substance abuse. Elizabeth is currently a Clinical Instructor at UNC School of Medicine's Department of Psychiatry in the Addiction Detox Unit on UNC's Wakebrook campus. Elizabeth offers counselling, education and follow-up services for individual patients seeking treatment for their substance use disorders.

Elizabeth Lackey, MSW, LCSW

Beth Lackey currently serves as Partners' Provider Network Director, responsible for the development, credentialing, monitoring, and advancement of the provider network and service options for Partners' members. She holds a Bachelor of Social Work from Appalachian State University and a Master of Social Work from the University of South Carolina. Beth's career began when working with foster children. She was responsible for managing, reviewing, and training foster parents to deliver quality care to the children they served, along with managing crisis placement. She also has experience in quality management, call center services, and utilization management. Beth served as Partners'

FACULTY CONTINUED...

first mental health and substance abuse care coordination director, helping to establish the department in 2012. Her training specialties include provider monitoring, relative as direct support employee, documentation, reporting, and data collection.

Louis Leake, CSAC

Louis Leake is a Resource Council Member at a State Prison in Scotland County, a Board Member of The Cumberland County Juvenile Crime Prevention Council, a member of C.A.R.E. (Community Addiction Resource Exchange Coalition), and a primary instructor at Fayetteville Technical College. He has worked as part of an assertive community treatment team. Louis is a Clinical Manager at Carolina Treatment Center and manages 10 counselors. Louis served as the Regional Vice President of the Addiction Professional of North Carolina, 2014-2016, and he won the APNC "Art of Counseling Award" in 2015. He became a Certified Recovery Coach in September of 2015 and received his National Addiction Counseling Certification in January 2016.

Mya Lewis, MHA

Mya Lewis is the Intellectual/Developmental Disabilities (IDD) & Traumatic Brain Injury (TBI) Section Chief with the North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS). She holds a BS in Human Development and Family Studies, as well as a master's in Healthcare Management. Mya started working with children and adults with IDD during college. Since graduating, Mya has been supporting individuals with IDD in many different roles. Working with a service provider agency, she has worked in the roles of direct care staff supervisor (qualified professional), director, and assistant vice president. Wanting to use her talents beyond her local community, Mya joined DMH/DD/SAS as an IDD program manager in 2012 and recently become the Section Chief for IDD and TBI services. Mya participated in inaugural Advancing Strong Leadership for North Carolina DD Professionals program – a leadership development initiative funded by the NC Council for DD and operated by the National Leadership Consortium on DD at the University of Delaware. She has almost 20 years of experience in the field and uses this experience help guide the policy work for individuals with IDD and TBI.

Kim Newsom

Kim Newsom began consulting with local programs after having served over 40 years in human resources management within the NC State Personnel system and as the Personnel Director at Randolph County. He has assisted with the merger of the Durham and Wake LME's to include policy development, classification and compensation plans, establishing their substantially equivalent system and handling related policy interpretations and employee relations issues. For many years Mr. Newsom has provided consultation and training for employees, supervisors and managers on a wide variety of human resource and management development topics, which has included a long history with FARO and NC TIDE conferences.

Thomas Nisbet

Thomas Nisbet is a management consultant with 8+ years of experience advising healthcare and government clients. He supports, manages, and delivers complex cognitive and analytics solutions. His areas of expertise include cognitive business decision support, business transformation, and advanced analytics.

Ann Palmer, BA

Ann Palmer is a parent of an adult son with autism, an author and presenter, and a professional having worked with families for over 24 years. She was the Parent Support Coordinator at the UNC TEACCH Autism Program where she developed a volunteer parent mentor program that provided support to over 800 families in North Carolina. She was the Director of Advocacy and Chapters at the Autism Society of North Carolina where she coordinated over 50 Chapters and support groups across North Carolina. Ann is currently a faculty member of the Carolina Institute for Developmental Disabilities (CIDD) at the University

of North Carolina in Chapel Hill, training multidisciplinary graduate level students on working with families. She is the author of four books published by Jessica Kingsley Publishers: *Realizing the College Dream with Autism or Asperger Syndrome: A Parent's Guide to Student Success*, *Parenting Across the Autism Spectrum: Unexpected Lessons We've Learned* (co-authored with Maureen Morrell and winner of the Autism Society of America's Literary Work of the Year), and *A Friend's and Relative's Guide to Supporting the Family with Autism: How Can I Help?* Her most recent book, *Drinking, Drug Use and Addiction in the Autism Community*, is set to be released in October 2017.

Chris Penrod, MBA, BSA, BSAE

Chris Penrod 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.

LaKisha Perry-Green, BA, MS, MBA

Lakisha Perry-Green is a healthcare business consultant, whose expertise includes human resources, corporate compliance, internal auditing and employee trainings. She is often sought out when new companies are in the start-up phase of development. Working in the field of healthcare requires compliance from many rules and regulations, which LaKisha guides her clients through. Being in this field for over 16 years, she has been seen as a navigator for organizations who want to stay in compliance.

She received dual BA degrees in Public Administration and Political Science from North Carolina Central University in Durham, NC; and MS degrees from Strayer University in Public Administration and Human Resource Management. She also obtained a MBA from Strayer University with a concentration in Human Resource Development. As a frequent accreditation consultant for providers across the state of NC, she also has travelled across the US as an active surveyor for CARF, International since 2009.

Belinda Pettiford, MPH

Belinda Pettiford has over 30 years of experience in public health. She has been with the North Carolina Division of Public Health, Women's and Children's Health Section (Title V) since November 1995. During this time, she has been the Program Manager for Healthy Beginnings (North Carolina's Minority Infant Mortality Reduction Program) and Healthy Start Baby Love Plus (3 federally funded perinatal disparities programs). She was also the Unit Supervisor for Perinatal Health and Family Support within the Women's Health Branch.

Belinda was named the Head of the Women's Health Branch in March 2012; in this capacity, she provides oversight to the state's maternal health, family planning, preconception health, teen pregnancy prevention, sickle cell, tobacco use, and numerous programs focused on equity in birth outcomes.

Belinda has provided leadership for numerous national, state, and local efforts. She currently chairs North Carolina's Perinatal Health Strategic Plan Committee and leads the state's efforts with the Collaborative Improvement and Innovation Network (CollIN) to reduce infant mortality. Belinda also co-chairs the Perinatal Health Committee of the Child Fatality Task Force (CFTF) within the state. The CFTF is a legislative study commission directed by the NC General Assembly.

She received her MPH from the University of North Carolina in Chapel Hill and undergraduate degrees from the University of North Carolina in Greensboro.

FACULTY CONTINUED...

Jeanne Pritt, MSOD, SPHR, SHRM-SCP, CQA

Jeanne Pritt is CEO of People Outcomes, LLC, an organization development consulting firm focused on leveraging organization strengths through talent, strategy and culture. She brings decades of senior leadership experience and a broad range of experience in the human services, health and government industries. Her scope includes human resources, organization and leadership development, executive and team coaching, program development, quality management, strategic planning, accreditation and systems and organization alignment in a heavily regulated environment.

Pritt received her MS in Organization Development and her Coaching Certification from McColl School of Business, Queens University of Charlotte and her BA in Psychology from Penn State University. Current certifications include Coaching, Workplace Big 5 Profile® and Change Intelligence (CQ)® which she uses to develop organization initiatives and strategies.

While born in Pennsylvania, Jeanne considers herself thoroughly 'southernized' and calls Waxhaw her home. In her free time she reads, spends time with her daughter and friends, travels and enjoys many active hobbies, such as hiking with her dog, Lilly.

Krista Ragan, MA

Krista Ragan is the Program Manager for the Behavioral Health Crisis Referral System at the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services. Prior to BH-CRSys, Krista worked at a nonprofit for two years on the development of web-based systems including client/services tracking system for youth aging out of foster care and a health insurance premium payment assistance program for low-income individuals and families. Krista's previous experience in NC Government includes 10 years with the Division of Public Health, with more than eight years working on the State Child Fatality Prevention Team at the NC Office of the Chief Medical Examiner. As Research Director of the NC CFPT, Krista oversaw all child fatality review and reporting, coordinated the multidisciplinary State Team, presented data and recommendations to the legislature and state and local government agencies, trained diverse professionals groups, assisted in death investigations and participated in committees at the state, regional and national levels. Krista gained valuable experience working at a counseling center, group home and prison while she completed her graduate studies in Forensic Psychology and undergraduate studies in Forensic Psychology and Communications at Castleton University in Vermont.

Prior to leading DMA, Mr. Richard was the Deputy Secretary for DHHS Behavioral Health and Developmental Disability Services, and State Operated Healthcare Facilities since March 2014. He joined DHHS in May 2013 to lead the Division of Mental Health, Developmental Disabilities and Substance Abuse as its director. Mr. Richard joined DHHS after leading The Arc of North Carolina, an advocacy and service organization for people with intellectual and developmental disabilities, as its Executive Director for 24 years. Mr. Richard has a bachelor's degree in education from Louisiana State University.

Dale Roenigk, PhD

Dale Roenigk is the Director of the NC Benchmarking Project at the UNC School of Government. Dale also teaches graduate students in various decision analytic methods. Previously, Dale worked for eight years at the NC DMH/DD/SAS in the former Willie M. program and later quality management sections.

Starleen Scott-Robbins, MSW, LCSW

Starleen Scott Robbins has been with the Division of MH/DD/SAS since 1994. She has over 25 years of clinical and administrative experience in the Addictions field. She currently serves as a Mental Health Program Manager with the Addictions & Management Operations Section and is the designated Women's Services Coordinator for the Division. In her role with the division, Ms. Scott Robbins is responsible for coordination

of policy development, implementation and clinical monitoring for state-funded substance use disorder and mental health services; management of state and federal funds that support gender responsive substance abuse services for women and their families; coordination of a statewide capacity management system for treatment services for pregnant and parenting women and their families; and provision of technical assistance to substance use disorder programs statewide.

Ms. Scott Robbins has participated in several national projects including the SAMHSA-Center for Substance Abuse Treatment (CSAT) Expert Panel-Core Competencies for Working with Women and Girls in Behavioral Health; SAMHSA-TIP-51, National Consensus Panel: Substance Abuse Treatment: Addressing the Specific Needs of Women; the National Center on Addiction and Substance Abuse at Columbia University CASAWORKS for Families- National Advisory Board and the SAMHSA-CSAT National Consensus Panel: Screening, Assessment and Outreach for Welfare Recipients. She also served as a member of the SAMHSA National Advisory Committee for Women's Services. Ms. Scott Robbins is a contributor to the American Society of Addiction Medicine, 2013 Third Edition of The ASAM Criteria: Treatment Criteria for Addictive, Substance Related and Co-Occurring Conditions manual. She currently serves as the Immediate Past President of the National Association of State Alcohol and Drug Abuse Directors Women's Services Network. Ms. Scott Robbins was also recently appointed to the NC Substance Abuse Professional Practice Board.

Starleen Scott Robbins received her BS in Psychology from St. Lawrence University in Canton, NY and her MSW from Adelphi University in Garden City, NY.

Adolph Simmons, MS

Adolph Simmons has over 24 years of experience with the State of North of Carolina. He is currently responsible for the External Quality Review process for the Medicaid Waiver, with includes the validation of Performance Improvement Projects for all Managed Care Organizations.

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

Jesse Smathers is an established and forward thinking specialist in home and community-based services for persons with intellectual and/or developmental disabilities. Additionally, he has broad experience in specialty behavioral health services. Jesse began his career at Blue Ridge Center in 1996 as an Educational Specialist in a day treatment facility that served youth with behavior challenges, autism, and other intellectual disabilities. He transitioned to Developmental Disability Services in 1999 to serve as a case manager. Due to his leadership qualities, Jesse has held various management positions with Blue Ridge Center and Western Highlands Network working with and for persons with disabilities. During this time period, Jesse completed the inaugural Advancing Strong Leadership for North Carolina DD Professionals program – a leadership development initiative funded by the NC Council for DD and operated by the National Leadership Consortium on DD at the University of Delaware. In addition to over 20 years of experience working to improve services for persons with intellectual and/or developmental disabilities, Jesse has multi-year experience working as a mental health and substance use disorder counselor in outpatient treatment programs specializing in medication assisted treatment for opioid dependence. He has presented at several statewide and national conferences. Jesse is currently employed by Vaya Health as the Specialty Populations Clinical Director and is project lead for the Supported Living: Making a Difference Initiative that Vaya was awarded by the NC Council on Developmental Disabilities.

Zac Talbott, CDAC II, ICDAC, CMA

Zac Talbott first came in contact with opioid addiction as a graduate student at the University of Tennessee, Knoxville College of Social Work where his own addiction to prescription pain killers spiraled out of control, resulting in academic dismissal. Eventually hope was found through medication-assisted treatment, and today he is co-owner and

FACULTY CONTINUED...

serves as Program Sponsor of two opioid treatment programs. Prior to becoming a provider, Zac worked on national MAT patient advocacy issues, and he has spoken at national AATOD Conferences as well as state provider associations. Zac serves on the Board of Directors of the Southeastern Institute on Chemical Dependency (SICD), the certification committee of the Alcohol and Drug Abuse Certification Board of Georgia (GA's IC&RC Affiliate), and is an officer for Opioid Treatment Providers of Georgia (the GA state AATOD chapter and provider's association). Even as a provider Zac is and always will be first and foremost a patient advocate.

Sharlena Thomas, LPCS, LCAS, CCS

Sharlena Thomas currently serves as the state Clinical Director with RHA Health Services, Behavioral Health Division. A graduate of Denver Theological Seminary with a MA in Counseling Psychology, 1995, and the University of North Carolina, Greensboro with a BS in Psychology and a BA in Communication Disorders, 1992, she joined RHA Behavioral Health in 2006. Over her 20+ year professional career, she has provided direct care, program development, crisis management, and consultation and supervision services within community Mental Health, Substance Use, and Intellectual Developmental Disability (MH/SU/IDD) treatment agencies serving children, adolescents, and adults. She has provided case management, individual, group, and family therapy, and crisis services in outpatient, day treatment, and psychiatric residential settings while working for the Mental Health Corporation of Denver, the Devereux Foundation, New Vistas Behavioral Health, and RHA Health Services. Further, she participated as a crisis first responder to the Columbine, Littleton, CO incident in 1999. Her clinical foci and passions include trauma, substance use, crisis management, training, program development, and supervision/consultation for professionals working with persons in recovery with an applied emphasis on Evidence Based Practice utilization and Clinical Outcomes.

Andrew Walsh, Esq., JD, MBA

Andrew Walsh has been an attorney, educator, negotiator and facilitator for almost three decades. He has served as in-house attorney for new legal departments at three of the North Carolina local management entities/managed care organizations (LME/MCOs): currently as founding Chief Legal Officer & General Counsel for Partners Behavioral Health Management, and previously with Cardinal Innovations (fka PBH) and Vaya (fka Smoky Mountain Center). Throughout his career, he has negotiated contracts, disputes, settlements and many other matters. He has helped design, implement, oversee, maintain or advise various healthcare dispute processes, including nascent mediation programs meeting regulatory, accreditation and North Carolina Office of Administrative Hearings (OAH) requirements. Mr. Walsh has been involved in alternative dispute resolution (ADR), including negotiations, mediation and arbitration, for over 15 years, including teaching negotiation and ADR at two law schools and numerous workshops and trainings in various states. As the first Dispute Resolution Director for the South Carolina Bar, administrator for the South Carolina Supreme Court's Commission on ADR and Board of Arbitrator and Mediator Certification, and liaison for the SC Bar's ADR Section, Mr. Walsh administered the full rewrite of the state's court-annexed ADR rules, expansion of the state mandatory ADR program, and the design and supervision of the mediator and arbitrator certification programs. He has served on the ABA Section on Dispute Resolution as a co-chair of the Program Models & White Papers subcommittee and as a Court-ADR Program Advisor (CAPA) and on a community mediation center's board of directors. He is also a registered mediator and arbitrator in Georgia; a certified circuit court arbitrator and mediator and family court mediator in South Carolina; and an NASD (now FINRA) trained arbitrator. He is a licensed attorney in North Carolina, South Carolina, Georgia and Tennessee and worked in other positions, including as an antitrust economic analyst, appellate law clerk, and assistant dean. In addition to healthcare law, Mr. Walsh has practiced primarily in large, complex business litigation, including director and officer (D&O) liability, audit malpractice, failed bank litigation, antitrust investigations

and securities litigation (e.g., the Prudential Bache LP-investors' class action damages settlement arbitrations). He is a member of the dispute resolution sections of the American, North Carolina, South Carolina, Georgia and Tennessee bar associations. As a council member of the North Carolina Bar Association's Health Law Section and active member of the North Carolina Society of Health Care Attorneys, he has organized, presented and written on North Carolina Medicaid transformation law. Mr. Walsh is an executive committee member of the Association of Corporate Counsel's (ACC's) Health Law Committee, organizing the 2013 Health Law Spotlight seminars in Los Angeles, including a popular Affordable Care Act panel; and active local chapter member helping to arrange a mini-MBA program and co-presenting a business ethics seminar focused on pharmaceutical fraud investigations. He has also been registered as a Dispute Resolver with and author for the American Health Lawyers Association (AHLA). Mr. Walsh holds a Six Sigma greenbelt and licenses to practice law in North Carolina, South Carolina, Georgia and Tennessee, having served on the health law committees of each bar. Mr. Walsh holds a BA degree in economics and history from Cornell University; JD and MBA (finance) degrees from the University of Tennessee; and taken non-degree graduate studies in econometrics, industrial organization and regulatory economics at George Washington University.

Robert Werstlein, PhD

Bob Werstlein is a licensed psychologist and presently Training Director with Daymark Recovery Services. He has 39 years experience and has been Clinical Director for three inpatient psychiatric/substance abuse facilities (33, 75, and 114 bed) and several outpatient MH/SA treatment agencies.

Lisa Wheeler, MS Ed, PA-C

Lisa Wheeler has been practicing in healthcare for almost 30 years. She has practiced and continues to practice as a physician assistant, licensed in the state of North Carolina. Lisa has practiced in multiple disciplines and currently practices in the areas of addiction medicine and pain management. Lisa currently works at Asheville Comprehensive Treatment Center, an Opioid Treatment Program (OTP) and Allayant Pain Management, a pain management and Office Based Opioid Treatment (OBOT) program.

When she is not working as a PA she owns a healthcare consulting company focusing on practice operational efficiency, insurance credentialing, contract management and compliance.

Lisa received her bachelor's degree from York College of Pennsylvania, her master's degree from Old Dominion University, her Physician Assistant degree from Wake Forest University's Bowman Gray School of Medicine.

Lisa lives in Asheville with her spouse and 2 dogs. She loves the outdoors including hiking, kayaking and also just plain doing nothing.

NC TIDE FALL 2017 CONFERENCE: NAVIGATING THE FUTURE

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, A2, B3, C3, C4, C5, D3, D5, E1, E3, E4, F3, G3, G5 & H2.

No CE Credits are offered for the following Networking Sessions: B, C & D

NCSAPPB Credits are currently pending and will be updated as sessions are approved

DAY 1, OCTOBER 23, 2017

BREAKOUT A (10:15-11:45AM)

- A1:** GASB Other Postemployment Benefits: A Deep Dive and Recording of Fixed Assets and Depreciation
- A2:** Developing Resilience in Turbulent Times
- A3:** Opportunities and Challenges in Medication Assisted Treatment (MAT)
- A4:** The NC Behavioral Health Crisis Referral System
- A5:** Drinking, Drug Use and Addiction in the Autism Community

BREAKOUT B (1:15-2:45PM)

- B1:** An Introduction to the Community Resiliency Model® (CRM)
- B2:** Practice Guidelines in the Treatment of Adolescent Substance Use Disorders (SUDs): Part 1 of 2 *(must attend both parts to receive credit)*
- B3:** Predictive Analytics...What's Next?
- B4:** Intellectual/Developmental Disabilities (IDD) and Traumatic Brain Injury (TBI): Similarities, Differences, and Resources
- B5:** Confidentiality of Substance Use Disorder (SUD) Records: Changes to Federal Law 42 CFR 2

BREAKOUT C (3:00-4:30PM)

- C1:** Documentary Film, *Resilience* (sequel to 2015, *Paper Tigers*): Part 1 of 2 *(must attend both parts to receive credit)*
- C2:** Practice Guidelines in the Treatment of Adolescent Substance Use Disorders (SUDs): Part 2 of 2 *(must attend both parts to receive credit)*
- C3:** Provider Reimbursement Rate Development
- C4:** Value-Based Care Analytics
- C5:** Leading Through Change Intelligently

NETWORKING SESSIONS (4:30-5:30PM)

- A:** Q/A and Panel Discussion: Trauma, the ACE Study, and Resilience: Part 2 of 2 *(must attend both parts to receive credit)*
- B:** Provider Networking *(does not qualify for CE credit)*
- C:** MCO Networking *(does not qualify for CE credit)*
- D:** CFAC Networking *(does not qualify for CE credit)*

DAY 2, OCTOBER 24, 2017

BREAKOUT D (8:30-10:00AM)

- D1:** Health Information Exchange (HIE): Impact on the Behavioral Health and Intellectual/Developmental Disability (IDD) System
- D2:** Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change: Part 1 of 2 *(must attend both parts to receive credit)*
- D3:** Coaching and Mentoring Skills for Leadership Success
- D4:** Children with Complex Needs: What You Need to Know
- D5:** Interrelationship Diagrams: Looking for Causes in All the Right Places

BREAKOUT E (10:30-12:00PM)

- E1:** Penalties, Incentives, Oh My: Pay for Performance & Value-Based Contracts Trickle Down to MCOs and Providers
- E2:** Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change: Part 2 of 2 *(must attend both parts to receive credit)*
- E3:** A Review of DMH Produced Claim and Encounter Extracts and Reports
- E4:** Nominal Group Technique (NGT): Looking for Consensus
- E5:** Rethinking Guardianship: Building a Case for Less Restrictive Alternatives

BREAKOUT F (1:30-3:00PM)

- F1:** Relapse Prevention Cognitive Behavioral Therapy (CBT): Part 1 of 2 *(must attend both parts to receive credit)*
- F2:** Opioid Exposed Pregnancies and a Plan of Safe Care: Child Abuse Prevention and Treatment Act
- F3:** Performance Improvement Projects (PIP): Using PIPs to Strengthen Decision Making Around Quality
- F4:** Fraud and Fraud Prevention: The Legal Perspective
- F5:** Supported Living: Making a Difference

BREAKOUT G (3:15-4:45PM)

- G1:** Relapse Prevention Cognitive Behavioral Therapy (CBT): Part 2 of 2 *(must attend both parts to receive credit)*
- G2:** A Look in the Supervisor Mirror
- G3:** Negotiation 101: Revisiting Getting to YES
- G4:** Involuntary Commitment Law (IVC): Potential Changes and Current Issues
- G5:** Spreadsheet Fundamentals (Excel 101)

DAY 3, OCTOBER 25, 2017

BREAKOUT H (8:45-10:15AM)

- H1:** Moving From Programs to Supports: Stories of the Community
- H2:** Common Mistakes in MCO/Provider Communication

NC TIDE FALL 2017 CONFERENCE: NAVIGATING THE FUTURE

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 info

Name _____

Credentials _____

Social Security # **XXX-XX-**_____ (last 4 digits required)

Occupation _____

E-mail 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.

DAY 1

After
Oct. 11th

DAY 2

After
Oct. 11th

DAY 3

After
Oct. 11th

Fee: \$153 \$178 | \$153 \$178 | \$153 \$178

Current NC TIDE Member: \$203 (all 3 days) \$228 (all 3 days)

New/Renewing NC TIDE Member: \$233 (all 3 days) \$258 (all 3 days)
(Includes membership fee)

Group: \$233/per person (all 3 days) \$258/per person (all 3 days)

(Group: Five or more from same agency, registering and paying at same time. Must use paper registration form)

Onsite Registration: \$275 (all 3 days)

Total: _____

NC TIDE Cancellation Policy:

Registration fees, less a \$15.00 administrative fee, will be refunded if request is received by 5:00pm on September 22, 2017.

From September 23, 2017 - October 2, 2017, refunds less a 50% cancellation fee will be honored at your request.

No requests for refunds will be accepted after 5:00pm on October 2, 2017.

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.

Full payment must accompany your registration. Payment may be made by cash; check (payable to MAHEC); or by credit card.

Check is enclosed (Made payable to MAHEC) Credit card info provided
 Visa Mastercard Discover Card American Express
Account # _____

Exp _____ / _____ Code on back of card _____

Name on Card _____

Signature _____

18MH012/53459

Send completed registration form to:

[MAHEC Registration](#)

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