



2018 Transforming Care Conference: Transforming Care through Systems Integration & Communication

May 17 - 18, 2018

**BUY 4, GET 1 FREE
SPECIAL**

Dates, Times, Location

Thursday, May 17, 2018

Registration: 8:00 am - 8:30 am

Program: 8:30 am - 4:30 pm

Friday, May 18, 2018

Registration: 8:00 am - 8:30 am

Program: 8:30 am - 3:30 pm

MAHEC Mary C. Nesbitt Biltmore Campus
121 Hendersonville Rd.
Asheville, NC 28803

Early registration through May 10th

Fee: \$80.00 per day or \$160.00 for both days

SPECIAL GROUP RATE: BUY 4, GET 1 FREE

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

For every **four 2-day** registrations purchased for this conference, your agency can receive a **fifth 2-day conference registration FREE!** The group rate is \$160 each for the four 2-day conference registrations with no fee for the fifth registration. This rate expires on May 10th. After May 10th, each of the four 2-day conference registrations can be purchased at the rate of \$175 each with no fee for the fifth registration. (One day registrations do not count toward the total registered.) Please register using the last page of the brochure for this discounted rate. All registrations must be received at the same time. Groups **MUST** fax, scan/email, or postal mail registration forms to MAHEC.

Audience

The audience will include medical and behavioral health agency executives such as CEOs, COOs, CFOs, CIOs and IT/MIS leaders, chief quality officers and directors, physicians, nurse practitioners, physician assistants, nurses, care managers/coordinators, administrators, practice managers, mental health professionals, substance abuse counselors, social workers, psychologists, marriage and family therapists, school counselors, peer support specialists, intellectual/developmental disability providers, and other professionals and advocates interested in this subject.

Objectives

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

- Cite examples of best practices, resources and toolkits available at local, regional, state and national levels
- List ways organizations can enhance their delivery of whole person care, with a specific focus on communication strategies
- Adapt lessons learned from field-tested programs and approaches
- Align organizational priorities with current policy, funding and initiatives

Description

MAHEC and Vaya Health are jointly providing the 2018 Transforming Care Conference. The theme of this year's conference is communication and its critical contribution to whole person care. Conference sessions include updates on systems changes and policy implications, regional accomplishments, comprehensive care models and practices, and health information technology.

Content has been selected to assist providers and others interested in whole person care in gaining competence and expertise to promote practice change. Special foci will include:

- Substance use and the opioid epidemic
- Innovative community inclusion and coordinated care for those with intellectual and/or developmental disabilities and additional healthcare needs
- Use of health information technology
- Strategic planning for Medicaid transformation, pay for value, and complex care coordination

Breakout Session Key, by tracks:

A sessions are Opioid Use Disorder

B sessions are Intellectual & Developmental Disorders

C sessions are Health Information Technology



Jointly provided by



Day 1 - Thursday, May 17, 2018

- 8:00 – 8:30 Registration (light breakfast provided)
- 8:30 – 9:45 **Plenary 1: Stigma, Opioid Use and Overdose: What's the Connection?** | Ed Johnson, MEd, MAC, LPC
- 9:45 – 10:00 Break
- 10:00 – 11:00 **Breakout Session 1**
- 1A Addressing the Opioid Epidemic: North Carolina's (NC) Public Health Strategies | Nidhi Sachdeva, MPH
 - 1B Developing and Implementing an Integrated System of Community Supports: Focus on Quality, Not Compliance | Derrick Dufresne, MPA
 - *1C Current Realities and Future Forecasts: The Role of Technology in Surviving Health Reform | Robert Webb, AASCET, AASEET
- 11:00 – 11:15 Break
- 11:15 – 12:15 **Breakout Session 2**
- 2A Treating Pain Safely | Blake Fagan, MD
 - 2B The Leadership Of You | Lynne Seagle, MS, MPA
 - 2C Health Information Technology: Best Practices, Emerging Solutions and Lessons Learned Panel | Nina Vinson, MPH, *moderator*
- 12:15 – 1:15 Lunch (on your own)
- 1:15 – 2:15 **Breakout Session 3**
- * 3A WNC Substance Use Alliance: What it Means for Individuals and Providers | Tara Larson, EdS
 - 3B Complex Care Management for the I/DD Population | Judith Collins, MA, LPA; Jody Hill, MSW, LCSW
 - 3C NC Health Information Exchange, EHRs and Accountable Care and the Role of Technology in NC Medicaid Transformation Panel | Nina Vinson, MPH, *moderator*
- 2:15 – 2:30 Break
- 2:30 – 3:30 ***Plenary 2: NC Healthcare Topics Journalist Panel** | Tara Larson, EdS, *moderator*
- 3:30 – 4:30 **Plenary 3: Moving Toward Whole Person Health** | Adam Zolotor, MD, DrPH
- 4:30 pm Adjourn

***Sessions 1C, 3A, Plenary 2 and Plenary 4 do not qualify for NBCC or NC Psychologist credit**

Day 2 - Friday, May 18, 2018

- 8:00 – 8:30 Registration (light breakfast provided)
- 8:30 – 9:45 ***Plenary 4: The Dually-Diagnosed Life** | Melanie Hecker
- 9:45 – 10:00 Break
- 10:00 – 11:00 **Breakout Session 4: Skill Building Intensive (2 hours)**
- 4A Harm Reduction in NC: Meeting People Where They Are and Preventing Overdose, Stigma, Criminalization and Disease Among People We Love Who Use Drugs | Robert Childs, MPH; Sue Purchase, MBA
 - 4B Our Biggest Assets: Informed and Engaged Individuals, Families and Providers | Presenters include Jill Hinton, PhD, Vaya staff, and community partners
 - 4C Health IT Skill Building Sessions: For Newbies, Experts and Everyone In Between | Nina Vinson, MPH, *moderator*
- 11:00 – 11:15 Break
- 11:15 – 12:15 Breakout Session 4, continued
- 12:15 – 1:15 Lunch (on your own)
- 1:15 – 2:15 **Breakout Session 5: NC/WNC Spotlight**
- 5A Supporting Family and Friends Seeking Treatment for Opioid Use Disorders During a National Epidemic | Zac Talbott, BA, CADCII, CACII, E-CADC, MATS, ICADC
 - 5B Leveraging Innovation to Promote Health Improvements for People with I/DD | Katherine Makaila Mills, BA; Carson Ojamaa, MSW; Michael Maybee, BS, QP
 - 5C From Practice Management to Practice Transformation: The Information Systems Journey to Whole Person | Jerold Greer, CIO; Billy West, MSW, LCSW, CEO
- 2:15 – 2:30 Break
- 2:30 – 3:30 **Plenary 5: Current State of NC System Transformation** | Brian Ingraham, BA, MSW
- 3:30 pm Adjourn

Detailed Agenda with Session Descriptions and Objectives

Day 1 - Thursday, May 17, 2018

8:30 –9:45 Plenary 1

Stigma, Opioid Use and Overdose: What's the Connection?

While substance use disorders (SUDs) are stigmatized and individuals that have them face discrimination, there is a greater level of stigma and discrimination associated with opioid use disorder (OUD) and the medications commonly used to treat it. This session will explore this stigma and, more importantly, the part it plays in overdose deaths.

- List two ways people with OUD experience discrimination
- List two ways opioids differ from other illicit/non-prescribed medications
- Integrate an understanding of SUD as a chronic medical condition
- Correlate behavioral health providers' misconceptions with patient overdose

10:00 – 11:00 Breakout Session 1

1A. Addressing the Opioid Epidemic: NC's Public Health Strategies

In 2016, an average of four people per day died from opioid overdose in NC. Unintentional opioid deaths have increased from just over 100 deaths in 1999 to over 1,380 deaths in 2016. More recently, even more people are dying due to illicit narcotics (heroin, fentanyl and fentanyl analogues) at alarming rates. In addition to the painful human costs, in 2016 alone, the economic impact of these deaths was an estimated \$2.1 billion in medical expenses and lost work. We'll explore what led to this public health crisis and reveal the latest epidemiological data in NC. Then we'll explore NC's Opioid Action Plan and discuss our state's collaborative approach to turn the tide on this epidemic.

- Describe the public health burden of the opioid epidemic based on recent epidemiological data
- Examine the NC Opioid Action Plan's seven focus areas
- Name at least three strategies and actions NC is implementing to address this epidemic

1B. Developing and Implementing an Integrated System of Community Supports: Focus on Quality, Not Compliance

This presentation will challenge participants to rethink traditional approaches to community support teams acting on behalf of an individual. Too often the words used involve quality, but the actions and plans reflect a focus on compliance. The goal is to find those elements and outcomes that are important to the person, not the system. The more an individual leads a self-determined life, the more likely the system will reap the benefits of better health and wellness outcomes. This presentation is sponsored by the Supported Living: Making the Difference Initiative, currently led by Vaya Health. The initiative is made possible through a collaborative relationship between the NC CDD and the NC Money Follows the Person Project (NC MFP), a Medicaid project that assists Medicaid-eligible persons in NC who live in inpatient facilities to move into their own homes and communities with supports.

- Describe the elements that may keep someone safe that are not healthy for them
- Identify key strategies, resources, and approaches that community support teams must implement for a healthy lifestyle for individuals with I/DD
- Identify key first steps and actions that must be implemented to assist in transitioning from a focus on client and programs to belonging and citizenship

1C. Current Realities and Future Forecasts: The Role of Technology in Surviving Health Reform*

Speaker will summarize how technology is necessary for organizations to survive and thrive amidst health care reform. He will clarify the minimum requirements discuss how agency leaders should proactively and strategically plan for the ever expanding use of technology. Specific topics may include: business and fiscal rules of thumb; leading changes in organizational culture; helping staff adjust to rapid change; EHR/vendor selection; analytics; outcomes monitoring and business intelligence in a "pay for value" world; and how technology can support communication across agencies.

*Note: This session does not qualify for NBCC or NC Psychology credit.

- Cite key business and technology strategies necessary for surviving and thriving amidst health care reform and Medicaid transformation in NC
- Prioritize needed staff skill training and/or organizational capacity development, in the area of information technology and use of data

11:15 – 12:15 Breakout Session 2

2A. Treating Pain Safely

Attendees will learn the evidence-based analysis of the relative effectiveness of medications and their side effects, recommendations on how to improve treatment of acute and chronic pain and recognizing substance use/opioid use disorders.

- Describe the impact of the opioid crisis
- Identify the CDC guidelines with regard to prescribing opioids for acute pain
- Identify the CDC guidelines with regard to prescribing opioids for chronic pain

2B. The Leadership of You

Lynne Seagle will address the leadership role we all have within the disability system. Her session will cover five essential lessons gleaned from the presenter's work in over three decades at Hope House Foundation. Ideas and techniques to move leadership from an abstract concept to actionable items everyone can master will be offered in this interactive presentation. This presentation is sponsored by the Supported Living: Making the Difference Initiative, currently led by Vaya Health. The initiative is made possible through a collaborative relationship between the NC CDD and the NC Money Follows the Person Project (NC MFP), a Medicaid project that assists Medicaid-eligible persons in NC who live in inpatient facilities to move into their own homes and communities with supports.

- Assist participants in embracing and engaging in leadership regardless of the position or role they hold within the disability service system
- Explore techniques and concrete actions that can move the mission of inclusion of people with disabilities in all aspects of life further and more effectively
- Motivate and encourage more active participation in broader activities whether that be organizationally, locally or nationally

2C. Health Information Technology: Best Practices, Emerging Solutions and Lessons Learned Panel

A panel of professionals will guide participants in best practices and solutions in EHR selection and implementation. Panelists include: Robert Webb, AASCET AASEET, Chief Information Officer, Vaya Health; Natalie Moore-Raper, MHS, MAHEC; Mary McCaskill, BS, RT-R, NC AHEC; Jerold Greer, CIO, Daymark Recovery Services

- Enumerate tips for selecting a good behavioral health-focused EHR or evaluating an existing one
- Delineate best practices for EHR training, staff engagement and successful go live/upgrades
- Describe the use of direct secure messaging and associated technologies for integrated care and cross-agency communication
- Cite key lessons learned from a large behavioral health organization in successfully adopting and using health information technology

1:15 – 2:15 Breakout Session 3

3A. WNC Substance Use Alliance: What it Means for Individuals and Providers*

This session will discuss the strategic plan developed and adopted by WNC SU Alliance and how it impacts individuals with behavioral health and I/DD challenges. Providers will play a key role in accomplishing the goals of the plan.

*Note: This session does not qualify for NBCC or NC Psychology credit.

- Discuss the nine priorities of the SU Strategic Plan
- Identify the steps within provider agencies that can be taken to address the strategies of the plan, including increasing access to services and supports, providing evidence-based practices and partnering with community agencies
- Discuss how the SU Strategic Plan meets the goals and interfaces with the Medicaid 1115 Waiver and other state/federal plans

3B. Complex Care Management for the I/DD Population

This presentation provides an overview of successes and barriers in implementation of a complex care management program that serves people with I/DD. Highlights of this program showcase instances where provider support and communication contributed to securing processes and program outcomes.

- Identify processes and tools that affect provider workflows in the implementation of complex care management programs
- Identify successes associated with complex care management in a population that has participated in this intervention "close to home"

3C. NC Health Information Exchange, EHRs and Accountable Care and the Role of Technology in NC Medicaid Transformation

A panel of professionals will provide strategic guidance about health information exchange and the role of health IT in forthcoming changes to reimbursement models and system transformation. Panelists include: Alice Miller, NC Health Information Exchange Authority (NC HIEA); Tim Morgan, MPA, CQI Director, October Road; Robert Webb, AASCET AASEET, Chief Information Officer, Vaya Health.

- Cite NC health exchange deadlines, objectives, pilot projects, and resources for behavioral health providers
- Describe the importance and practical uses of an EHR for outcome reporting and participation in pay for value initiatives such as accountable care
- Prioritize health information technology functions necessary for surviving and thriving amidst health care reform and Medicaid transformation in NC

2:30 –3:30 Plenary 2*

NC Healthcare Topics Journalist Panel

This session offers attendees the opportunity to hear insights and discoveries directly from NC journalists who cover healthcare topics in the state. Panelists will share their experience covering stories of critical importance to healthcare transformation and attendees will have the chance to ask questions of these professionals about their understanding of the issues that underpin healthcare status and drive change in the state. Panelists include: Alexandria Bordas, MS, Asheville Citizen-Times; Frank Taylor, MA, Carolina Public Press.

***Note:** This session does not qualify for NBCC or NC Psychology credit.

- Demonstrate a deeper understanding of healthcare issues facing residents of WNC as well as the entire state
- Be able to articulate the insights that journalists who cover healthcare topics have developed about healthcare transformation
- Discuss critical issues that are shaping whole person healthcare in NC

3:30 –4:30 Plenary 3

Moving Toward Whole Person Health

In the context of Medicaid transformation in NC, health systems (physical and behavioral health) and communities will be called on to address whole person health. The move to fee-for-value health care continues to drive interest in addressing determinants of health outside the walls of our usual physical and behavioral health systems. As part of this work, the North Carolina Institute of Medicine (NCIOM) is convening a Task Force on Accountable Care Communities. Accountable Care Communities are partnerships between health systems, community based agencies and local government to work together to improve the health of the community. As foundation for this work, the NCIOM developed a list of metrics to measure the health of Medicaid beneficiaries under Medicaid transformation. Measurement, fee-for-value transformation and integration will set the stage for this discussion.

- Identify what is meant by accountable care community, who should be involved and what the role of an accountable care community could be in the emerging health system
- Examine the importance of social determinants of health as part of the strategy for health reform in NC

Day 2 - Friday, May 18, 2018

8:30 –9:45 Plenary 4*

The Dually-Diagnosed Life

In this presentation, Melanie Hecker will share her experiences as a person living with both autism and bipolar disorder. She will tell her story from the first time she learned she was autistic, to elementary, middle and high school through college and gaining her first employment. Through her story, she will share the challenges she faced, the troubles she overcame, the strengths she discovered and how she found her true place in this world.

*Note: This session does not qualify for NBCC or NC Psychology credit.

- Explain the unique challenges faced by people with autism, people with mental health challenges and the dually-diagnosed
- Examine life strategies for overcoming these challenges
- Identify the strengths and positive experiences that autism and disability bring
- Identify some little-known traits of autistic people
- Examine the process of seeking services when dually-diagnosed
- Identify challenges, strengths and accommodations in education and employment of individuals with autism, bipolar disorder and dual diagnosis

10:00 – 11:00 Breakout Session 4

4A. Harm Reduction in NC: Meeting People Where They Are and Preventing Overdose, Stigma, Criminalization and Disease among People We Love Who Use Drugs

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use and sex work. Harm reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs and people who perform sex work. Harm reduction incorporates a spectrum of strategies from safer use, managed use and abstinence, to meeting drug users and sex workers “where they’re at,” to address conditions of use and sex work individually and in combination.

In this breakout, Robert Childs and Sue Purchase of the NC Harm Reduction Coalition will discuss: what harm reduction is, some examples of harm reduction interventions in NC, how harm reduction can reduce mortality and disease, harm reduction legal reforms and harm reduction ethics.

- Define harm reduction and name at least three harm reduction interventions
- Describe how harm reduction can reduce overdose related mortality and decrease the burden of diseases associated with drug use and sex work
- Describe legal reforms around syringe access and overdose in NC
- Describe how harm reduction and abstinence based movements are not at odds with each other but, instead, can work strongly together in conjunction to meet people where they are at

4B. Our Biggest Assets: Informed and Engaged Individuals, Families and Providers

A growing body of evidence demonstrates that individuals who are supported in actively engaging in their healthcare achieve better health outcomes and quality of life. This session will utilize case-based learning and small group discussion to explore key issues and best practices that align with whole person care and systems integration. The multi-disciplinary facilitator team will present individual profiles and support intentional learning through the use of guided questions and discussion. Presenters include: Jill Hinton, PhD, Vaya staff and community partners.

- Identify best practices and resources that support individuals with I/DD to make informed decisions about their health and healthcare
- Describe strategies that support active engagement with the healthcare team and community
- Describe their role in enhancing the quality of whole person care provided to individuals and families

4C. Health IT Skill Building Sessions: For Newbies, Experts, and Everyone In Between

Participants will be divided by need and interest into three or more small groups. Each group will be led and facilitated by a technical assistance coach. A choice of groups will be offered. Some groups will be provided with a tool or checklist and given a sample scenario (a health information technology challenge in the field of behavioral health). Participants will apply the tool to better assess the root cause(s) of the challenge and identify possible solutions. Other groups may focus on an in-depth review of new and emerging technologies and/or maximizing their use of higher order functions in EHRs (e.g., analytics, outcome tracking, population health and care coordination). Remaining groups may include an organizational self-assessment (HIT capacity, current use of technology) and hands-on coaching to identify strategic next steps. Groups will be led by: Nina Vinson, MPH, Vaya Health; Tommy Duncan, BS, Vaya Health; Laura Woodrup, MS, LMFT, Vaya Health; Mark Holstrom, MSHA, FACHE, CMPE, MAHEC; Mary McCaskill, BS, RT-R, AHEC. *Continues on next page.*

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- Identify strategic next steps to guide their organization's adoption and use of health information technology
- Cite new and emerging technologies that merit further evaluation and possible adoption at their agency
- Differentiate between minimal and ideal use of key EHR functions to support population health and integrated care
- Apply a tool or checklist to enhance their organization's effective use of technology (e.g., vetting an EHR vendor, developing a staff training and engagement plan, change management strategy and end user technology skill assessment)

1:15 – 2:15 Breakout Session 5: NC/WNC Spotlight

5A. Supporting Family and Friends Seeking Treatment for Opioid Use Disorders (OUD) During a National Epidemic

During the national opioid addiction and overdose epidemic, it is critical that the public knows the truth about evidence-based treatment approaches. This is especially true for family and friends of those dealing with OUDs. A basic understanding of opioids, OUDs, evidence-based interventions, medication-assisted treatments (MATs) with methadone and buprenorphine, as well as the concept of recovery, are all critical when supporting someone in treatment or seeking treatment. This presentation will help participants garner this basic understanding while obtaining the knowledge and skills necessary to fight the stigma and misinformation that can be an enormous barrier to people seeking and remaining enrolled in MATs for OUDs.

- Describe what opioids are and what classifies an OUD
- State an understanding of and specific statistics around the current opioid epidemic in the United States
- Describe the importance of family and friends understanding evidence-based interventions
- Describe what MAT is and why it is critical for family and friends of those with OUD to know why MAT is the “gold standard” treatment approach
- State an understanding of the concept of recovery and how language used by family and friends can help or hinder an individual in finding recovery
- Describe why it is critical for family and friends to support their loved ones in MAT through combatting stigma and misinformation

5B. Leveraging Innovation to Promote Health Improvements for People with I/DD

Embracing change can set the stage for innovation. This session will highlight the accomplishments of two community provider organizations, Watagua Opportunities Inc. and Family Preservation Services, that are actively engaged in innovative practices that promote whole person care for children and adults with I/DD. Learn how innovation can lead to better solutions and value for the individual, organization, community and systems of care.

- Describe two innovative programs implemented in WNC that improve quality-of-life and person-centered choices for people with I/DD
- Identify two strategies that a community provider organization can utilize to promote innovation and systems integration

5C. From Practice Management to Practice Transformation: The Information Systems Journey to Whole Person

This session will provide the answers to the following questions: Do we connect to the Health Information Exchange (HIE)? Do we hire staff to key lab results? How do we convince medical staff to get on board when adopting healthcare technology standards can mean more work, not less? Do we implement a patient portal? Do we integrate external healthcare data into our own system to support medical decision making? Join this session for the answers.

- Enumerate the major building blocks of HIT
- Summarize key pitfalls and lessons learned associated with adoption of health IT and EHRs
- Restate the key strategies associated with successful implementation of health IT
- Identify what characterizes successful organizations and differentiates them from other organizations

2:30 – 3:30 Plenary 5

Current State of NC System Transformation

This session will provide an overview of the Advancing NC Whole Health coalition as well as updates on current activities of the coalition, an LME- MCO perspective on opportunities for providers to consider as they plan for the future state of behavioral health and I/DD care in NC, and a discussion of how whole person care is incorporated into current planning for system transformation.

- Identify public policy associated with NC's medication transformation initiative
- Identify how the NC Advancing Whole Health Coalition aligns with that policy
- Identify how integrated care is central to both

Plenary Speakers

Ed Johnson, MEd, MAC, LPC

Ed Johnson obtained a bachelor's degree from Auburn University and a master's degree in Clinical Counseling from the Citadel. Since March 2010 Ed has worked as a program manager for the Southeast Addiction Technology Transfer Center (ATTC) located at the National Center for Primary Care, Morehouse School of Medicine. He has worked in the field of Addiction Prevention, Treatment and Recovery for over 25 years in both frontline and supervisory positions, 18 of which were with individuals with opioid use disorders in medication assisted treatment programs. He has provided numerous trainings in the Southeast on Addiction and Recovery, Recovery-Oriented Systems of Care, Professional Ethics, HIV/Addiction, Opioid Dependency/Treatment, issues related to Lesbian, Gay, Bisexual and Transgender (LGBT) Individuals and Addiction and Clinical Supervision. He is currently credentialed/licensed as a Master Addiction Counselor (MAC), a Certified Clinical Supervisor (CCS), and a Licensed Professional Counselor (LPC).



Adam J. Zolotor, MD, DrPH

Adam J. Zolotor, MD, DrPH, is the President and CEO of the North Carolina Institute of Medicine and Associate Professor of Family Medicine at the University of North Carolina School of Medicine. Dr. Zolotor has practiced family medicine in a small-town practice, rural emergency department, county health department and academic medical center. Dr. Zolotor started his academic career in child injury research and is well known nationally for his work on the prevention of physical abuse, shaken baby syndrome and child discipline, as well as the policy issues around prevention. Dr. Zolotor joined the NCIOM in 2012 as the Vice President, and has served as the President and CEO since 2014. Dr. Zolotor has been involved in the Institute's leadership in developing many new initiatives, including the rural health plan, the child maltreatment prevention plan, the plan for Alzheimer's and related dementia and the legislative health policy fellowship program. He also led the NCMJ through a transformative change to a mostly online distribution with dramatic increase in the statewide footprint. Dr. Zolotor still practices family medicine at the University of North Carolina. He earned both his master's degree and doctorate in public health as well as his medical degree from the University of North Carolina at Chapel Hill. His undergraduate degree and residency training were at the University of Michigan.



Melanie Hecker

Melanie Hecker is a 23-year-old college student studying Public Policy at the University at Albany. She also has spent the past four years as an employee of YOUTH POWER!, an advocacy group for and by young people with disabilities and experience in state systems. In addition, she also sits on the New York State Independent Living Council Youth Subcommittee, sits on New York State's Post-Secondary Advisory Council for Students with Disabilities to the Board of Regents, is the co-chair of her synagogue's disability inclusion committee, and is a member of Delta Alpha Pi Disability Honor Society and Who's Who in American Colleges and Universities. She is a graduate of Hudson Valley Community College with a degree in Human Services.

Melanie has been a motivational speaker since she was 15 years old. Her first speaking engagement was to a group of college psychology students during Autism Awareness Week. She says she knew then and there that she wanted to be a motivational speaker. She saw then, and she continues to see, that she has the ability to change and motivate people with her words. "I have always known that my true calling is to be a motivational speaker," Melanie says. "I speak for those on the autism spectrum who do not have a voice and for the mentally ill who may be struggling for acceptance."

Melanie recently launched her website www.melaniemotivates.com. There you can find information about awards she has earned (including the Lt. John Finn Award for Volunteerism from the Albany County Division of Youth and Families), about her mission and vision (motivating families, providers and students dealing with special needs through public speaking) and about her speaking engagements. One thing Melanie wants everyone with a dual diagnosis to know is, "You're not alone. Even if it feels like things will never change, just know there will always be improvement." She also had a few words of wisdom for all individuals with disabilities and their families. She says, "Even when you think things can't improve, they can, and likely will."



Brian Ingraham, BA, MSW

Brian Ingraham is CEO of Vaya Health, where he has used more than 30 years of experience in public sector healthcare to transform Vaya from an area authority to a modern managed care organization. Vaya (formerly known as Smoky Mountain Center) manages Medicaid and other public funds for behavioral health and I/DD services in 23 WNC counties that, collectively, are home to more than 1 million people. In January 2017, Vaya operated an annual budget of more than \$400 million and employed nearly 500 staff.

During his eight years as CEO, Brian has overseen Vaya's implementation of the state's 1915(b)/(c) Medicaid waivers and a 2013 expansion that doubled the number of people served. In addition to increasing business efficiencies and outreach to providers and stakeholders, he has introduced dozens of community reinvestment initiatives funded with cost-savings from effective Medicaid management.

Brian began his career in New York state, where he served in the public healthcare/social services sector for 20 years. Before moving to North Carolina, he spent four years as executive director of the nonprofit Fairview Recovery Services, Inc., in Binghamton, NY. He remains deeply committed to person-centered values, innovation and continual advancement to meet the needs of the future.



Tara Larson, EdS

Tara Larson, EdS, is Senior Healthcare Policy Specialist with Cansler Collaborative Resources, Inc. With over 35 years of experience in the health and human service field, she offers a wealth of knowledge and expertise in the administration of state and federal policy. From her initial work as a habilitation specialist in community mental health programs to her ultimate responsibilities as Senior Deputy Director, Chief Clinical Operations Officer, and as interim Director of the State's Medicaid program, Tara has an understanding of the issues related to healthcare administration and management that is virtually unequalled in NC. Also included in her vast experience is her tenure as the Deputy Director of the North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services where she had responsibility for the oversight and management of the central office, state operated facilities (psychiatric hospitals, substance use treatment centers and developmental centers) and the local community programs.



Please note: Sessions 1C, 3A, Plenary 2 and Plenary 4 do not qualify for NBCC or NC Psychologist credit

Credits

NCSAPPB (Combination): Application has been made for a combination of “Substance Abuse Specific” and “General Skill Building” credit from the North Carolina Substance Abuse Professional Practice Board. Full session attendance is required to receive credit. **11.5 Hours | 7.25 GSB | 4.25 SAS**



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 at each part is required to receive credit from the NC Psychology Board. **Both days: 9.25 Hours; Day 1: 5.25 Hours; Day 2: 4.00 Hours**

NBCC: Mountain Area Health Education Center (MAHEC) has been approved by NBCC as an Approved Continuing Education Provider, ACEP No. 5514. Programs that do not qualify for NBCC credit are clearly identified. MAHEC is solely responsible for all aspects of the programs. Full session attendance is required to receive credit. **Both days: 9.25 Hours; Day 1: 5.25 Hours; Day 2: 4.00 Hours**

CEU: The Mountain Area Health Education Center designates this entire continuing education activity as meeting the criteria for 1.2 CEUs as established by the National Task Force on the Continuing Education Unit. You must attend the entire session or activities to receive CEUs. **Both Days: 1.2 CEUs | Day 1: 0.6 CEUs | Day 2: 0.5 CEUs**

Contact Hours: MAHEC designates this continuing education activity as meeting the criteria for **11.5 Contact Hours (6.25 Contact Hours for Day 1; 5.25 Contact Hours for Day 2)**. Full session attendance is required to receive credit.

Planning Committee

Amanda Adams, MS | MAHEC, Asheville, NC
Judith Collins, MA, LPA | Vaya Health, Asheville, NC
Rhonda Cox, HSP-PA | Vaya Health, Asheville, NC
Karen Lambert | MAHEC, Asheville, NC
Karen Luken, MS | Disability and Health Consultant, Oak Island, NC
Scott Melton, MDiv | MAHEC, Asheville, NC
Jesse Smathers, PLPC, LCAS | Vaya Health, Asheville, NC
Nina Vinson, MPH | Vaya Health, Asheville, NC

11.5 CNE Contact Hours

This continuing education activity was approved by the Mountain Area Health Education Center (MAHEC), an approved provider by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation **(6.25 CNE Contact Hours for Day 1; 5.25 CNE Contact Hours for Day 2)**. Participants must attend 80% of the activity to receive credit.

Continuing Medical Education (CME)

Accreditation: This activity has been planned and implemented in accordance with the accreditation requirements and policies of the North Carolina Medical Society (NCMS) through the joint providership of the Mountain Area Health Education Center (MAHEC) and Vaya Health. MAHEC is accredited by the NCMS to provide continuing medical education for physicians.

Credit Designation: MAHEC designates this live activity for a maximum of 11.5 AMA PRA Category 1 Credits™ **(6.25 Credits for Day 1; 5.25 Credits for Day 2)**. Physicians should only claim credit commensurate with the extent of their participation in the activity. Session 2A of this conference will offer 1.00 contact hour(s) which will fulfill the North Carolina Board of Dental Examiner and Podiatry Examiners, OR 1.00 AMA PRA Category 1 Credit(s)™ which will fulfill the North Carolina Medical Boards requirement of controlled substance continuing education.

Disclosure: MAHEC adheres to the ACCME Standards regarding industry support to continuing medical education. Disclosure of faculty and commercial support relationships, if any, will be made known at the time of the activity.

Medical Course Director

Blake Fagan, MD

Directions to the Biltmore Campus

121 Hendersonville Rd., Asheville, NC, 28803

From I-40 Eastbound, take Exit 50 and turn left onto Hendersonville Road.

From I-40 Westbound, take Exit 50B and merge onto Hendersonville Road.

At the first light, turn left into the DoubleTree Hotel complex. Turn left (away from the hotel). You will see a steep driveway on your right. Turn right and go up that driveway to the MAHEC Biltmore Campus.

From 19-23 (I-26) take 240 East to Exit 5B (Charlotte Street). Exit right onto Charlotte Street. At the 4th light, make a left onto Biltmore Avenue. Proceed through 8 traffic lights. At the 9th light turn right into the DoubleTree Hotel complex. Turn left (away from the hotel). You will see a steep driveway on your right. Turn right and go up that driveway to the MAHEC Biltmore Campus.

HOTEL INFORMATION

Hotel rooms are available at a special rate for participants of this conference. *Reservations must be made by **May 1, 2018** to qualify for the reduced rate.

Please visit the following links for more information:

[DoubleTree](#)

[Click Here for Online Reservations](#)

2 DOUBLE BEDS
NONSMOKING rates from \$135.00/Night

[Hampton Inn](#)

[Click Here for Online Reservations](#)

2 QUEENS W/FRIDGE
NONSMOKING rates from \$129.00/Night

Registration

Early Registration Deadline: May 10, 2018

Early registration fee is \$80.00 for Day 1 only; \$80.00 for Day 2 only, or \$160.00 for both days and includes light breakfast at registration, administrative costs, educational materials and refreshments. If registration is received after the deadline, the total will be the registration fee + \$15.00.

MAHEC has a pay-up-front policy for all CE programs. The only exceptions will be for pre-approved programs where an individual payment plan is appropriate. Registrations received without accompanying payment will not be processed and participants who have not paid the course fee will not be admitted into the program.

Cancellations received at least two weeks in advance of the program date will receive a full refund unless otherwise noted. Cancellations received between two weeks and up to 48 hours prior to the program date will receive a 70% refund unless otherwise noted. No refunds will be given for cancellations received less than 48 hours prior to the program date. All cancellations must be made in writing (fax, mail, or email). Substitutes can be accommodated in advance of the program.

BUY 4, GET 1 FREE SPECIAL

For every **four 2-day** registrations purchased for this conference, your agency can receive a **fifth 2-day conference registration FREE!** The group rate is \$160 each for the four 2-day conference registrations with no fee for the fifth registration. This rate expires on May 10th. After May 10th, each of the four 2-day conference registrations can be purchased at the rate of \$175 each with no fee for the fifth registration. (One day registrations do not count toward the total registered.) Please register using the last page of the brochure for this discounted rate. All registrations must be received at the same time. Groups **MUST** fax, scan/email, or postal mail registration forms to MAHEC.

Have a question about registering?

Registration Information: 828-257-4475
registration@mahec.net

Have a question about content?

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



Special Services:
828-348-3619



@MAHECEd



☐ Updated contact information

Please note: Your contact information will be shared with Vaya Health.

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.

Fee:

Thursday, May 17th only: ☐ \$80.00 ☐ \$95.00 after May 10th

Friday, May 18th only: ☐ \$80.00 ☐ \$95.00 after May 10th

Both days: ☐ \$160.00 ☐ \$175.00 after May 10th

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

SPECIAL GROUP RATE: BUY 4, GET 1 FREE

Both days: ☐ \$160.00 per person for 4 registrations, 5th is free

After May 10th ☐ \$175.00 per person for 4 registrations, 5th is free

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

☐ Check is enclosed (made payable to MAHEC)

☐ Visa ☐ Mastercard ☐ Discover Card ☐ American Express

Account # _____

Exp _____ / _____ Security code _____

Name on Card _____

Signature _____

Please note: Sessions 1C, 3A, Plenary 2 and Plenary 4 do not qualify for NBCC or NC Psychologist credit

Please select breakout sessions for the day(s) you will attend:

Thursday, May 17:

Breakout Session 1

- ☐ 1A Addressing the Opioid Epidemic: North Carolina's (NC) Public Health Strategies
- ☐ 1B Developing and Implementing an Integrated System of Community Supports: Focus on Quality, Not Compliance
- * ☐ 1C Current Realities and Future Forecasts: The Role of Technology in Surviving Health Reform

*This session does not qualify for NBCC or NC Psychologist credit.

Breakout Session 2

- ☐ 2A Treating Pain Safely
- ☐ 2B The Leadership Of You
- ☐ 2C Health Information Technology: Best Practices, Emerging Solutions and Lessons Learned Panel

Breakout Session 3

- ☐ 3A WNC Substance Use Alliance: What it Means for Individuals and Providers
- *This session does not qualify for NBCC or NC Psychologist credit.
- ☐ 3B Complex Care Management for the I/DD Population
- ☐ 3C NC Health Information Exchange, EHRs and Accountable Care, and the Role of Technology in NC Medicaid Transformation Panel

Friday, May 18:

Breakout Session 4

- ☐ 4A Harm Reduction in NC: Meeting People Where They Are and Preventing Overdose, Stigma, Criminalization and Disease among People We Love Who Use Drugs
- ☐ 4B Our Biggest Assets: Informed and Engaged Individuals, Families and Providers
- ☐ 4C Health IT Skill Building Sessions: For Newbies, Experts and Everyone in Between

Breakout Session 5

- ☐ 5A Supporting Family and Friends Seeking Treatment for Opioid Use Disorders During a National Epidemic
- ☐ 5B Leveraging Innovation to Promote Health Improvements for People with I/DD
- ☐ 5C From Practice Management to Practice Transformation: The Information Systems Journey to Whole Person

18MH036/55279

[Click Here to Register Online](#)

Send completed registration form to:

MAHEC Registration

121 Hendersonville Rd., Asheville, NC 28803

Fax to 828-257-4768

or

Register online at www.mahec.net