TUESDAY, DECEMBER 5

12:00 p.m.
Exhibits Open

1:30 p.m. – 4:00 p.m.
PRE-CON SESSIONS
CEO’s Guide to Understanding Cyber Security and Liability – How to Protect Your Organization

Leveraging Technology to Capture Outcomes and Demonstrate Value: Practical Approaches to Move to Value Based Care

Foundation for Success - An Optimized Electronic Health Record (EHR)

NC’s Behavioral Health Crisis Referral System (BH-CRSys): A New System for Improving Crisis Placement

2:30 – 3:00 p.m.
Networking Break

WEDNESDAY, DECEMBER 6

6:30 a.m. - 9:30 a.m.
Breakfast - Hotel Dining Room
SPONSORED BY: Alexander Youth Network, AmeriHealth Caritas, Brynn Marr Hospital, Centene, Children’s Hope Alliance, Holly Hill Hospital, Monarch and Optum

7:30 a.m.
Registration Opens

8:30 a.m. - 4:00 p.m.
Exhibit Hall Open

9:30 a.m. – 11:00 a.m.
OPENING PLENARY SESSION
Designing the Future: National and State Leadership Perspectives on Medicaid Transformation

SPONSORED BY: Relias Learning

11:00 a.m. – 11:30 a.m.
Session Break
SPONSORED BY: Acadia Healthcare, CARF International, Children’s Hope Alliance, Centene, Coastal Horizons, CNP Technologies, ICAN Solutions, Molina Healthcare, Inc., and Optum

11:30 a.m. – 12:30 p.m.
SPARKING INNOVATION
Hospital Partnership: Using Data-Predictive Analytics for Youth Interventions

Try Something New: Implement Whole Person Transitional Care

Better Information and Referral Services: Strengthening Access and Improving Outcomes

Enhancing Primary Care for Patients with Serious Mental Illness

12:30 p.m. - 2:00 p.m.
Lunch
SPONSORED BY: Children’s Hope Alliance, GHA Autism Supports, GT Independence, Netsmart, Old Vineyard Behavioral Services, Pride in NC, RI International and RHA

2:00 p.m. - 4:00 p.m.
CONCURRENT SESSIONS
Medicaid Managed Care: Understanding the Shift to a Value Based System

Serving Individuals with Complex Needs When Crisis Strikes

Looking Ahead - A Dialogue with Commercial Managed Care Plans

Child Welfare: Bridging the Gap Between Social and MH/I-DD/SUD Services

Connecting Value-Based Services to Whole Person Care

4:00 p.m. – 5:30 p.m.
Exhibit Hall Reception

6:00 p.m. – 7:00 p.m.
Consumer Caucus

8:30 p.m.
Midnight Dance Party
SPONSORED BY: Aym Technologies/OnTarget, Children’s Hope Alliance, Coastal Horizons, CNP Technologies, ICAN Solutions, and Molina Healthcare, Inc.
THURSDAY, DECEMBER 7

6:30 a.m. - 9:30 a.m.
Breakfast - Hotel Dining Room

SPONSORED BY: Acadia Healthcare, DDR, Inc., The Echo Group, Frye Regional Medical Center, and LIFESPAN Incorporated

7:30 a.m.
Registration Opens

9:00 a.m. – 4:30 p.m.
Exhibit Hall Open

9:30 a.m. – 11:30 a.m.
CONCURRENT SESSIONS
Coordinating Local Human Service Structures to Strengthen Outcomes for Recovery
Locally Addressing the Opioid Crisis
Utilizing Emerging Virtual Care Methods to Improve Access to Care
Whole Person Care for Individuals with I-DD
Say It, Engage It: Building Leadership and Advocacy Skills for Families and Individuals

11:30 a.m. – 12:00 p.m.
Session Break


12:00 p.m. -1:30 p.m.
Lunch

SPONSORED BY: Aym Technologies/OnTarget, CNP Technologies, Centene, Coastal Horizons, ICAN Solutions, Molina Healthcare, Inc., Optum, Southern Pharmacy Services, Therap Services, Universal MH/DD/SAS and Valant

1:30 p.m. - 3:00 p.m.
GENERAL SESSION
Preparing for Medicaid Reform in North Carolina: The Future is Here

3:00 p.m. – 3:30 p.m.
Session Break


3:30 p.m. – 4:30 p.m.
SPARKING INNOVATION
It’s Worth the Investment: Housing IS a Healthcare Strategy
Using the Power of Data to Make Decisions
After the Hospital Discharge: A Collaborative Approach to Increase Timely Follow Up
Innovation through Consultation: NC Activities that are Advancing Service Integration

5:00 p.m. – 6:30 p.m.
Programs of Excellence Awards Reception

SPONSORED BY: Acadia Healthcare, Alexander Youth Network, Brynn Marr Hospital, CARF International, Centene, Community Choices, Inc., Community Based Care, Children’s Hope Alliance, DDR, Inc., The Echo Group, Frye Regional Medical Center, GHA Autism Supports, GT Independence, Holly Hill Hospital, LIFESPAN Incorporated, Monarch, Netsmart, Old Vineyard Behavioral Services, Optum, Pride in NC, RI International, RHA, Southern Pharmacy Services, Therap Services, Universal MH/DD/SAS and Valant

FRIDAY, DECEMBER 8

6:30 a.m. - 9:30 a.m.
Breakfast - Hotel Dining Room

SPONSORED BY: Community Based Care, Community Choices, Inc., Cone Health Behavioral Health Services, Rapid Resources for Families, and Vidant Health Behavioral Health

9:30 a.m. - 11:30 a.m.
CLOSING PLENARY SESSION
How to Reimagine and Reset Your Organization for a Digital Transformation

SPONSORED BY: Optum, Centene, Acadia Healthcare, and Children’s Hope Alliance

11:30 a.m.
Door Prize Drawing

12:00 p.m.
Adjourn

THANK YOU TO OUR CONFERENCE SPONSORS

SILVER SPONSORS

REGISTRATION ONLINE: www.nc-council.org/december-conference
WHY ATTEND?
The NC Department of Health and Human Services (DHHS) has set out a plan to implement whole person Medicaid managed care in North Carolina over the next several years. This includes integrating physical and behavioral healthcare for individuals in the MH/IDD/SUD population with the highest levels of need while ensuring the integrity of specialty services through a defined service management process. At this time it is unclear what the proposed management organizations will look like or how they will operate given the regions outlined in the plan. One thing is clear, however; DHHS intends to move quickly to begin implementation of the program design. This year’s conference will offer attendees the opportunity to hear from both state and national Medicaid leaders and from those already offering statewide managed care plans across the country. Speakers will also address innovations on a number of hot button topics – value based care, social determinants, the opioid crisis, care integration and much more. Prepare to meet the demands of North Carolina’s Emerging Horizon, by attending this year’s conference.

WHO SHOULD ATTEND?
Anyone who wants to better understand the future of NC’s behavioral health and I/DD healthcare system and new structures that will require value based performance, new partnerships and more. This includes: LME/MCO CEOs, directors, management staff, board members, provider CEOs, managers, medical directors, clinical directors, quality management staff, service coordinators, medical professionals and administrators, state and private hospital leaders, qualified professionals, state agency leaders, Department of Social Service leaders, psychologists, psychiatrists, counselors, licensed clinicians, social workers, CFACs members, consumers, family members, advocates, peer support staff, County Commissioners, members of the General Assembly, and others interested in our system.

CONTINUING EDUCATION
This Conference is being Co-Sponsored by the Southern Regional AHEC

Earn up to 11 Hours of Continuing Education Credits
$25 CEU Registration Fee
• Substance Abuse - 11 hours of NAADAC Credit will be awarded to participants who attend 100% of the program. Southern Regional AHEC adheres to NAADAC Education Provider Guidelines Provider #843

• Social Workers and others - 11 contact hours. 11 Contact hours for social workers are included in this program. This program does not provide specific NBCC Credits. However, per LPC licensure guidelines, you may submit up to 15 contact hours of continuing education by attending programs by affiliates of the National Area Health Education Center Education (NAO). SR-AHEC is a member of the NAO.

WHEN IT COMES TO HEALTH, EVERYTHING — AND EVERYONE — MATTERS.

From physical health to emotional wellness, we believe that when it comes to health, everything matters. That’s why we look for ways, both big and small, to improve the lives of our members and provide access to quality healthcare for more individuals.
CHRISTMAS IN THE VILLAGE OF PINEHURST

There is nothing like the beautiful Village of Pinehurst at Christmas. A quick stroll or shuttle ride and you are in the beautifully decorated Village of Pinehurst where you can enjoy unique holiday shopping and fine dining. The Carolina Hotel is also beautifully appointed with Christmas decorations, themed trees, lights and more - a great place to take holiday photos.

PINEHURST - GOLF U.S. OPEN COURSES!

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Golf Pinehurst at Significant Discounts!
Conference attendees receive significant discounts on golfing the famous Pinehurst courses! Take advantage of our group discount!
Pick your course:
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Golf rates are good three days before and after the conference! Tee times can be made once your hotel reservation is made. Call for a time: 1-855-287-1286.

ATTENDEES RECEIVE A 30% DISCOUNT ON ALL SPA TREATMENTS!

Indulge Yourself! You deserve it! Make plans now for your spa treatment. View the list of spa treatments. To make an appointment, call 1- 800-487-4653 and press #4. Be sure to tell them you are with the “NC Council Conference” to get your 30% discount!

Don’t have time during the conference? Spa discounts and hotel rates apply three days before and after the conference – come early, stay late!

NEW - PHOTO BOOTH

Pose for Fun! This year we have one more reason to explore the exhibit hall - a new photo booth! Get together your colleagues and friends to take some fun pics that you won’t soon forget. Creative props offer added entertainment - everyone will be doing it! Instant photo sharing allows you to quickly post to your favorite social media sites. You will also take away a hard copy print to share.

RESOURCES ADVANTAGE

Access over a 100 professionals with the resources, information and answers you need to meet new organizational demands. Experts are available to discuss latest innovations in EHR technology, clinical services, direct care, assistive devices, consulting, data management, financial services, insurance, pharmacy, inpatient care and much more.
A list of participating resource leaders will be available on the Council website in October.

FREE MASSAGES!

Relieve Your Tension – The Pinehurst Spa supplies us with Professional Massage Therapists ready to sooth your stress, aches and pains all day Wednesday and Thursday in the Exhibit Hall.

FREE MASSAGES THANKS TO OUR GENEROUS SPONSORS:
AmeriHealth Caritas, Children’s Hope Alliance, Alexander Youth Network, Brynn Marr Hospital, Community Choices, Inc., Community Based Care, Children’s Hope Alliance, Cone Health Behavioral Health Services, DDR, Inc., The Echo Group, Frye Regional Medical Center, GHA Autism Supports, GT Independence, Holly Hill Hospital, LIFESPAN Incorporated, Monarch, Netsmart, Old Vineyard Behavioral Services, Pride in NC, Rapid Resources for Families, RI International, RHA, Southern Pharmacy Services, Therap Services, Universal MH/DD/SAS and Valant

WEDNESDAY, DECEMBER 6, 2017
DANCE PARTY - 8:30 – Midnight
We have invited back John from Friendly Neighborhood DJ to host our dance and give everyone a chance to let off some steam and have some fun for a while! Make the party that much better, give John your song requests now!

DANCE SPONSORED BY: Aym Technologies/OnTarget, Children’s Hope Alliance, CNP Technologies, ICAN Solutions, and Molina Healthcare, Inc.

THURSDAY, DECEMBER 7, 2017
EXCELLENCE AWARDS RECEPTION - 5:00 – 6:30 p.m.

The NC Council’s Programs of Excellence Awards have a long standing tradition of recognizing innovation and excellence in programs and services. Please join us to honor this year’s award winners and learn about the creative programs going on in our state. All attendees are invited to enjoy some relaxed networking time and a delicious array of light hors d’oeuvres and desserts.

SPONSORED BY: Alexander Youth Network, Brynn Marr Hospital, CARF International, Centene, Community Choices, Inc., Community Based Care, Children’s Hope Alliance, DDR, Inc., The Echo Group, Frye Regional Medical Center, GHA Autism Supports, GT Independence, Holly Hill Hospital, LIFESPAN Incorporated, Monarch, Netsmart, Old Vineyard Behavioral Services, Optum, Pride in NC, RI International, RHA, Southern Pharmacy Services, Therap Services, Universal MH/DD/SAS and Valant
CEO’S GUIDE TO UNDERSTANDING CYBER SECURITY AND LIABILITY: HOW TO PROTECT YOUR ORGANIZATION

This discussion will be two-fold with a focus on the Cyber Security preventative measures your organization must address to protect itself from outside threats and understanding Cyber Liability and Security. In laymen’s terms you will hear how to reduce your risk of being hacked, protect against data theft, and understand legal fees and fines. In discussing Cyber Liability, you will understand cyber-breach targets, types of attacks, delivery methods, malware, and ransomware. Emphasis will be on the costs for notification, credit monitoring, and methods of insuring this risk through cyber liability insurance, as well as the potential impact on crisis management/public relations. Gain an understanding of the various insurance offerings, exclusions, and carrier positions available.

COURSE OBJECTIVES:
• Identify the difference between a virus and malware and how to reduce the damage done in case of infection
• Review the difference between a file/folder back up and a complete disaster recovery back up and which one fits your needs
• Discuss how the greatest threat to your business is the End User sitting in front of the computer and how to reduce that with user education and other tools
• Identify how to implement immediate changes to reduce the risk of hacking and data loss
• Discuss the financial ramifications from a cyber-attack and learn correct questions to pose for quality insurance coverage
• Discuss how to implement preventative measures and develop a disaster recovery plan

PRESENTERS: Victor Saavedra, Director of Sales, DataGroup Technologies and Randy Reeves, Senior Account Executive, Wells Insurance

LEVERAGING TECHNOLOGY TO CAPTURE OUTCOMES AND DEMONSTRATE VALUE: PRACTICAL APPROACHES TO MOVE TO VALUE BASED CARE

Value based care is the cornerstone of managed care. As NC moves into statewide implementation of managed care for Medicaid health, behavioral, IDD services in an integrated system, providers need practical direction on how to utilize technology to survive and thrive in this new environment.

COURSE OBJECTIVES:
• Identify standardized processes and workflows that enable the aggregation of a standardized data set that can be leveraged to track quality and outcomes
• Discuss how to leverage technology to “connect” to other providers and share information in a coordinated and standardized manner
• Review prevalent quality measures being used in Value Based Care programs across the country to support various integrated care models and understand the implications of process oriented metrics vs. outcome oriented metrics
• Review case studies of approaches taken with technology to support the following VBC models, such as Certified Community Behavioral Health Center, Health Homes Medicaid ACO’s and more.

PRESENTER: Denny Morrison, Ph.D., Chief Clinical Advisor, Netsmart. Morrison works closely with Netsmart’s clinical, medical and product teams to create value-added solutions that enable clients to participate in emerging models of care.
TUESDAY, DECEMBER 5, 2017
TECHNOLOGY PRE-CON
1:30 P.M. – 4:00 P.M.

FOUNDATION FOR SUCCESS - AN OPTIMIZED ELECTRONIC HEALTH RECORD (EHR)

Electronic Health Records (EHR) are the foundation for the clinical delivery models and strategic initiatives that health and human service companies are focused on every day. In the past, the ability to effectively and efficiently leverage an EHR was a serious competitive advantage. In today’s world, where data is king, it’s a foundational necessity just to survive. In this session we will walk through the process of properly selecting, implementing, and optimizing an EHR for your organization. No matter what stage of EHR use you’re in, this session will provide valuable insights to ensure your EHR is setting your organization up for future success.

COURSE OBJECTIVES:
• Identify how to go about finding the right EHR for your organization
• Review the key implementation steps your organization should complete for EHR success
• Discuss how best to optimize your EHR system

PRESENTER: Matt Hoffman, Managing Partners for Afia

NC’S BEHAVIORAL HEALTH CRISIS REFERRAL SYSTEM (BH-CRSYS): A NEW SYSTEM FOR IMPROVING CRISIS PLACEMENT

BH-CRSys is a new statewide web-based tool that will aid in the placement of individuals experiencing behavioral health crises. Going live in December 2017, BH-CRSys aims to reduce the length of time individuals must wait to be placed in appropriate treatment facilities and to increase the efficiency and timeliness of the placement process for both referring and receiving facilities. Division of MH/DD/SAS program staff and system users will discuss the history and purpose of BH-CRSys, eligible users, how BH-CRSys works and the benefits for referring and receiving facilities. The session will also discuss the ongoing collective effort that is necessary to develop and successfully implement a tool that improves the complex systems involved in crisis care.

COURSE OBJECTIVES:
• Explain the purpose of BH-CRSys
• Describe how BH-CRSys works
• Identify eligible users of the system
• Describe the benefits of participating in the system

PRESENTERS: Krista Ragan, MA, BH-CRSys Program Manager, NC DMH/DD/SAS ; Sharlena Thomas, LPCS, LCAS, CCS, State Clinical Director, RHA Health Services, Behavioral Health Division ; *Christine Zazzaro, AVP of Behavioral Health Access, Carolinas Healthcare System or *William Baker, Team Leader for Behavioral Health Patient Placement, Carolinas Healthcare System

PRE-CON CONTINUING EDUCATION
Earn up to 2 Hours of Continuing Education Credits

• Substance Abuse - 2.0 hours of NAADAC Credit will be awarded to participants who attend 100% of the program. Southern Regional AHEC adheres to NAADAC Education Provider Guidelines Provider #843
• Social Workers and others – 2.0 contact hours. 2.0 Contact hours for social workers are included in this program. This program does not provide specific NBCC Credits. However, per LPC licensure guidelines, you may submit up to 15 contact hours of continuing education by attending programs by affiliates of the National Area Health Education Center Education (NAO). SR-AHEC is a member of the NAO.

REGISTER ONLINE: www.nc-council.org/december-conference
KEYNOTE PRESENTERS

WEDNESDAY, DECEMBER 6, 2017
9:30 A.M. – 11:00 A.M. - Opening Plenary Session

DESIGNING THE FUTURE: NATIONAL AND STATE LEADERSHIP PERSPECTIVES ON MEDICAID TRANSFORMATION

As North Carolina prepares for managed care across all parts of the Medicaid system, healthcare organizations, providers, and consumer members want to know how the changing federal landscape will impact our state and local planning. From his perspective as the Chief Medical Officer at the National Council for Behavioral Healthcare, Joe Parks, MD, will report on current Medicaid policy and related legislative information from Washington, the impact of the Trump budget reductions, and new leadership at SAMHSA and the Centers for Medicare and Medicaid—factors that could impact NC’s waiver proposal and implementation. Parks will also delve into the ever shifting political atmosphere in our nation’s capital to help us as we navigate changes in the North Carolina system.

With this backdrop, Jay Ludlam, Assistant Secretary for Managed Care, NC DHHS, will speak to the qualities of a high functioning managed care system and address issues around regionalizing care as articulated by North Carolina’s Department of Health and Human Services Proposed Plan for Medicaid Managed Care. He will also provide up-to-the-minute information regarding next steps in the implementation of Medicaid transformation for 2018 and beyond.

COURSE OBJECTIVES:
- Review the budget and policy direction of key federal agencies
- Discuss the implications of federal changes on North Carolina’s healthcare system
- Identify next steps for North Carolina’s Medicaid planning and transformation in 2018 and beyond
- Discuss practical strategies for integrating the physical health care needs of consumers into the BH/I-DD service system

SPEAKERS: Joe Parks, M.D., Chief Medical Officer, National Council on Behavioral Health and former Medicaid and Mental Health Commissioner in Missouri

Jay Ludlam, Assistant Secretary for Managed Care, NC Department of Health and Human Services

FRIDAY, DECEMBER 8, 2017
9:30 A.M. – 11:30 A.M. - Closing Plenary

HOW TO REIMAGINE AND RESET YOUR ORGANIZATION FOR A DIGITAL TRANSFORMATION

North Carolina’s Proposed Program Design for Medicaid Managed Care provides a great opportunity for you to take a step back and reimagine your organization for the future. In an increasingly digital world where data is transforming entire industries (think Amazon, Netflix, Uber), how can you leverage digital technologies to reach your organization’s mission - better, faster and cheaper? During this interactive plenary session, attendees will understand the effects of new regulations, reforms and requirements, while learning how to establish meaningful connectivity among system partners in order to achieve worthwhile outcomes.

COURSE OBJECTIVES:
- Discuss the importance of embracing innovation and technology as they pertain to the use of data collection and knowledge sharing
- Demonstrate how to develop a roadmap and strategy for digital transformation at your organization
- Describe the role of your organization in a collaborative health ecosystem
- Review how to integrate proven clinical outcome measures to demonstrate value
- Identify how to leverage digital technologies to transform your payer relationships

SPEAKER: Ravi Ganesan
is President and CEO of Core Solutions, Inc. and is a recognized healthcare business leader, entrepreneur, visionary and evangelist for behavioral health technology. Mr. Ganesan is passionate about helping behavioral healthcare organizations improve care and manage costs by using technology as a strategic tool.

Closing Plenary Sponsored by Optum, Centene, Acadia Healthcare, and Children’s Hope Alliance

Opening Plenary Session is sponsored exclusively by Relias Learning

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending. AAFP Prescribed credit is accepted by the American Medical Association as equivalent to AMA PRA Category 1 Credit™ toward the AMA Physician’s Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed credit, not as Category 1.

REGISTER ONLINE: www.nc-council.org/december-conference
HOSPITAL PARTNERSHIP: USING DATA-PREDICTIVE ANALYTICS FOR YOUTH INTERVENTIONS

Duke and Alliance Behavioral Healthcare have partnered to use predictive analytics to identify youth at risk for long periods of treatment in therapeutic foster care and from the emergency department. Using claims available through Duke, Alliance and NC TRACKS, a predictive model was conceived and developed. As a result, Alliance and Duke implemented strategies to coordinate care and outreach to engage individuals and families in the services. The presentation outlines the partners’ process and the results thus far, and what applications are next.

COURSE OBJECTIVES: Learn about the use of predictive analytics; identify strategies to operationalize the use of the data and measure outcome; and discuss lessons learned and shared between LME/MCO and large hospital system and other system stakeholders.

PRESENTERS: Kate Hobbs-Knutson, MD, Alliance Behavioral Health Chief Medical Officer; Ginger Gialanella, MS, LMFT; MHSUD Care Coordinator/Hospital Liaison, Alliance Behavioral Health; and Kate Peterson, MS, PMP, ACP, Healthcare Network Project Manager, Alliance Behavioral Health.

TRY SOMETHING NEW: IMPLEMENT WHOLE PERSON TRANSITIONAL CARE

Ready to try something new? The Transitional Care Model (TCM), pioneered at the University of Pennsylvania, is at the forefront of evidence-based care. Managing transitions in care enhances patient experiences, improves health and outcomes, and represents better use of resources. Partners Behavioral Health Management (PBHM) adapted the TCM and began the pilot project within care coordination in January 2017. The target population includes individuals within the catchment area with a severe and persistent behavioral health diagnosis and who also have diabetes. The intent of the project is to ensure integrated care - including connections to appropriate services and diagnostic evaluations in all facets of care.

COURSE OBJECTIVES: Describe the University of Pennsylvania’s transitional care model; discuss the implementation of Partners BHM’s Whole Person Transitional Care (WPTC) model; identify barriers and successes in the implementation of the model.

PRESENTERS: Colleen Kinslow, MSW, LCSW, LCAS, CSI, Mental Health/Substance Use Care Coordination Adult Program Manager, Partners BHM; Shana Barus, RN, BSN, CCM, Mental Health/Substance Use Care Coordination Supervisor, Partners BHM; and Leah Williams, DrPH, MPH, Research Director, Partners BHM.

BETTER INFORMATION AND REFERRAL SERVICES: STRENGTHENING ACCESS AND IMPROVING OUTCOMES

The NC Department of Health and Human Services (DHHS), Division of Aging and Adult Services (DAAS) is partnering with United Way of North Carolina to make it easier for individuals, families, and caregivers of aging adults and/or people with disabilities to learn about and access the help they need to remain in their homes and communities. Through the No Wrong Door (NWD) initiative, efforts are underway with United Way’s NC 2-1-1 to develop a “virtual front door” to long-term services and supports (LTSS); providing awareness, education and assistance with connection to services. The partnership with NC 2-1-1 strengthens access to resources and improves health outcomes statewide by connecting people to the resources they need to remain in their homes and communities.

COURSE OBJECTIVES: Discuss how NC 2-1-1 can support people with their health and human service needs; identify how 2-1-1 can assist during disasters and; review how the No Wrong Door initiative is assisting older adults and people with disabilities in meeting their long term services and supports needs and outcomes from the first year of the NWD/2-1-1 partnership.

PRESENTERS: Heather Black, NC 2-1-1 Statewide Strategy Director, United Way of NC; and Stacy Hurley, No Wrong Door State Coordinator, NC DHHS, Division

ENHANCING PRIMARY CARE FOR PATIENTS WITH SERIOUS MENTAL ILLNESS

The current system, including primary care, is failing patients with serious mental illness (SMI). To address this issue, we have built a model of primary care that builds on the five components of the Patient Centered Medical Home (PCMH) model but adds an additional three components. The enhanced model presents evidence that such a resource intensive intervention can narrow disparities in patients with SMI. The three additional components for patients with SMI are: 1) a reduced panel size to allow for more frequent and longer visits; 2) all staff have extensive experience working with patients with SMI; and 3) open communication with behavioral health partners - talking in person or by phone after any complicated visit and time for dedicated face-to-face meetings.

OBJECTIVES: Describe results of an effort to narrow disparities in patients with SMI by implementing a full scope primary care office in a behavioral health setting; discuss the components of enhanced primary care; and review implications of results in the effort to expand integrated care models nationally.

PRESENTERS: Beat D Steiner MD MPH, Professor Department of Family Medicine, University of North Carolina School of Medicine and Brian Sheltman, MD, Professor Department of Psychiatry, University of North Carolina School Medicine.

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending. AAFP Prescribed credit is accepted by the American Medical Association as equivalent to AMA PRA Category 1 Credit™ toward the AMA Physician’s Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed credit, not as Category 1.
MEDICAID MANAGED CARE: UNDERSTANDING THE SHIFT TO A VALUE BASED SYSTEM

North Carolina is preparing for a cultural and business model healthcare shift from a fee-for-service to a managed care market in which performance-based systems are expected to be a hallmark. This shift will further move the MH/IDD/SUD system to a whole person model of care. What does this really mean for providers? For the consumers of services? For the medical professionals who are expected to function as the leaders in ensuring that high quality services are really driving the value proposition? Joe Parks, MD, Chief Medical Officer, National Council for Behavioral Healthcare Care will lead participants through a discussion of national trends and key concepts in whole person, value based care as we prepare for a statewide transition that requires the creation of new management principles and lines of business that formalize the integration of physical and behavioral health care services within NC’s Medicaid system.

COURSE OBJECTIVES:

• Discuss the opportunities and challenges central to whole person care
• Review what a value based system looks from the perspective of the manager, provider, and consumer
• Explain how to align clinical and management goals within a values based system of services
• Identify what stakeholders can do to position themselves for success in the coming transformation

SPEAKER: Joe Parks, M.D., Chief Medical Officer, National Council on Behavioral Health and former Medicaid and Mental Health Commissioner in Missouri

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending. AAFP Prescribed credit is accepted by the American Medical Association as equivalent to AMA PRA Category 1 Credit™ toward the AMA Physician’s Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed credit, not as Category 1.

SERVING INDIVIDUALS WITH COMPLEX NEEDS WHEN CRISIS STRIKES

Local communities across North Carolina have focused on building alternative crisis services for individuals with behavioral health needs in recent years. The General Assembly has designated funding for this initiative in an effort to divert individuals from emergency rooms in general hospitals to settings geared toward individuals with a behavioral health crisis. Providing focused and appropriate crisis services for an individual with an intellectual or developmental disability who is in a behavioral health crisis is one of the biggest challenges in our state. Participants will begin the session by hearing about and understanding the statewide priority for serving individuals with complex needs. This session will provide participants with lessons from a model that has been in place for 18 months through data analysis and experience. The presentation will highlight the initial funding and sustainability, project management, implementation, evaluation and ongoing program development in addressing the crisis needs of individuals with I-DD/MH.

COURSE OBJECTIVES:

• Review the statewide focus on individuals with complex needs and the importance of consumer involvement in developing appropriate alternatives for crisis care
• Identify strategies to improve workforce competence and confidence in meeting the needs of individuals with IDD/MH in a community comprehensive care center.
• Discuss specific policies and procedures providing work flows for effective screening, triage, crisis assessment, intervention and stabilization and prevention that integrate the person’s clinical home, community supports and are driven by the individual.
• Discuss how individuals with complex needs can be active participants addressing their potential crisis needs in a managed care model.

SPEAKERS: Sandy Feutz, MSW, LCSW, Vice President of Operations RHA Health Services; Colleen Barcus, LCSW, LCAS-A, RHA Health Services Program Director; Behavioral Health Urgent Care; Krista Engels, MSW, RHA Health Services, Regional Director C3@356; Corye Dunn, Director of Public Policy, Disability Rights North Carolina; Christina Dupuch, Chief Operations Officer, Vaya Health* *invited
LOOKING AHEAD: A DIALOGUE WITH COMMERCIAL MANAGED CARE PLANS
In the near future, behavioral health stakeholders in North Carolina—providers, advocates, and consumers—will experience a significant shift in service delivery and management. There will continue to be interactions and business relationships under Tailored Plan managers for Medicaid and State-funded services, and new relationships and systems will be established for Medicaid through Standard Plan managers. This session will give participants an opportunity to focus on Standard Plans and to hear directly from Commercial Plans and their behavioral healthcare experts who have experience in Medicaid managed care. Following an overview of key waiver components impacting behavioral healthcare, participants will learn about and have opportunity for dialogue regarding processes and expectations in the shift to addressing mild to moderate behavioral health needs of individuals as defined in the Standard Plan.

COURSE OBJECTIVES:
• Review behavioral healthcare provisions under the Standard Plan
• Understand how commercial plans have implemented Medicaid waivers in other states
• Discuss how commercial plans have included consumer involvement in plan development
• Review commercial plan business practices and expectations for network providers in their plans

MODERATOR: David R. Swann, M.A., LACS, CCS, LPC, NCC Senior Healthcare Integration Consultant, MTM Services

PANELISTS: Manuel A. Arisso, JD, LHRM, Staff VP Specialty Products BH & FC, Anthem/Amerigroup; Robert M. Atkins, M.D., MPH, Senior Medical Director, Aetna Medicaid; Gregory Lee, LCSW, Director of Behavioral Health Utilization Management, Meridian; Dr. Marketa Wills, MD, MBA, Physician Executive for Clinical Integration and Behavioral Health Programs and Initiatives; WellCare

CHILD WELFARE: BRIDGING THE GAP BETWEEN SOCIAL AND MH/I-DD/SUD SERVICES
Changing and strengthening the child welfare system in NC is a priority for the General Assembly and the NC DHHS. Our state is under the watchful eye of the federal government to ensure we are progressing in our State Plan for child welfare. Research shows that children placed in foster care have more mental and physical health conditions than children not placed in foster care even in comparison to those children who have similar living and environmental factors. Providing support and treatment prior to or out of home placement and during placement is critical to changing the outcomes for youth. These facts make it even more critical for local social service and MH/I-DD/SUD managers and providers to have relationships, communication and processes in place that address each child’s needs in a timely manner. This session will discuss partnerships, strategies and intervention and supports to bolster positive outcomes for youth and their families.

COURSE OBJECTIVES:
• Discuss the roles and responsibilities of providers, social service agencies and LME/MCOs to successfully meet the needs of youth and their families in the social service system—debunking the myths
• Discuss research studies and outcomes for youth and their families in the social services system
• Identify the differences in terminology used in the social service and behavioral health/IDD systems; the same words but different meanings
• Review model programs across the US and in NC linking physical, behavioral and social services and the strategies used for development and implementation
• Identify next steps within your agencies to meet the needs of youth and families exposed

SPEAKERS: Sherry Bradsher, former Deputy Secretary, NC DHHS and Director for the Division of Social Services, Senior Human Services Policy Specialist, Cansler Collaborative Resources

Tara Larson, Senior Healthcare Policy Specialist, Cansler Collaborative Resources

CONNECTING VALUE-BASED SERVICES TO WHOLE-PERSON CARE
Whole Person Care and Value-Based Services are catch phrases that have been around for many years, and now that they are the very cornerstones of the restructure for Medicaid and State-funded service delivery in North Carolina. But now more than ever it’s more important that we really understand how these words can complement one another and become working principles. Although patients with complex needs are a relatively small group, they frequently have multiple medical, mental health, and substance use treatment needs, and face social and economic challenges that complicate their health outcomes. For patients, who will be included in the Tailored Plan for MH/I-DD/SUD, one part of this equation cannot be achieved without the other. So it is paramount that all of these services are coordinated in a consumer-centered approach to achieve the goals of improved health and well-being through more efficient and effective use of resources. Participants in this session will hear from a national expert on a variety of state models designed to deliver whole person care to optimally serve individuals with complex needs. Our speaker has worked in state governments, and currently supports states and providers and will tackle the issues from both perspectives.

COURSE OBJECTIVES:
• Explain the North Carolina Program Design for Medicaid and State-funded services.
• Increase your understanding of how the restructure of Medicaid and State-funded services will require a culture and mindset shift in service and supports delivery.
• Discuss how providers in other states have been involved in integration and coordination efforts that have increased the outcomes for consumers.
• Describe how other states have connected VB services and whole person care.

SPEAKERS:
Caitlin Thomas-Henkel, MSW, Senior Program Officer, Center for Health Care Strategies, Inc.
Dave Richard, Deputy Secretary for Medical Assistance, NC DHHS

REGISTER ONLINE: www.nc-council.org/december-conference
COORDINATING LOCAL HUMAN SERVICE STRUCTURES TO STRENGTHEN OUTCOMES FOR RECOVERY

The framework of integration is a high level of collaboration and coordination amongst multiple human service and provider agencies that touch the life of an individual with significant behavioral health needs. Social determinants have become a focus as studies have shown improved outcomes for an individual when key social factors are identified and addressed. Integrating the treatment and supports can increase an individual’s ability to successfully function in the community with a mental illness or substance use disorder. This session is a unique opportunity for participants to learn from an expert in Recovery-Oriented System of Care who oversees the behavioral health services of Molina, a national managed care company operating in New Mexico.

COURSE OBJECTIVES:
• Discuss how a national managed care company has seen increased outcomes of care when there is a focus on coordination, integration, recovery and community support
• Identify ways to address key social determinants that can improve the success of individuals with significant behavioral health needs to remain in recovery and thrive in the community
• Review lessons learned in other states on integration and collaboration that can benefit North Carolina’s behavioral health and human service systems
• Identify how Peer Support Specialists can play a pivotal role in building recovery networks and communities to assist individuals in their behavioral and physical health and life issues

SPEAKER: Marcello Maviglia, MD, MPH, Medical Director, New Mexico Molina Behavioral Health Services

LOCALLY ADDRESSING THE OPIOID CRISIS

Communities are recognizing they cannot address the opioid crisis if stakeholder agencies stay in their silos. Collaboration and partnership has never been so critical as they are in developing and implementing strong initiatives that bring together the human service agencies that touch individuals at risk of misusing and becoming dependent upon opioids. In this presentation, a national expert on opioid abuse will describe successful strategies from across the country and they will learn about a local initiative in North Carolina that illustrates how and why a collaborative and strengths-based approach is promoting radical change.

COURSE OBJECTIVES:
• Describe how states and communities are addressing the national opioid epidemic.
• Discuss how to identify and gain participation of agencies to address the opioid crisis and about the progress a coalition has realized in less than two years.
• Describe how to use complex data to create baseline measures and to track progress in impacting the crisis.
• Identify Strategic Planning processes that build collaboration with multiple entities to comprehensively address a complex health epidemic.

SPEAKERS: Thomas McLellan, PhD, Founder and Chairman of the Board, Treatment Research Institute, former Deputy Director of the Office of National Drug Control Policy
William Gross, MPH, William A. Gross, Consulting staff, Gaston Community Health Care Commission; Barbara Hallisey, MSW, LCSW, Associate Clinical Services Director, Partners Behavioral Health Management; Velma V. Taormina, MD MSE FACOG, Medical Director, Gaston County Department of Health and Human Services
UTILIZING EMERGING VIRTUAL CARE METHODS TO IMPROVE ACCESS TO CARE

Behavioral Health Integration provides a model of integrative services that steps away from the traditional model of specialist co-location to a unique and transformative virtual model within primary care and pediatric clinics. Working as one team to better manage the patients’ overall health needs, Carolinas HealthCare System is bringing behavioral healthcare into the ambulatory care setting. Through implementation of the virtual model, pediatric practices and primary care clinics have immediate access to behavioral health services via video technology and other resources. Working in collaboration with system physician leadership, mental health screening tools were identified and standardized screening processes were incorporated into the model. This Collaborative Care model is designed to eliminate barriers to timely access, optimize provider skills, and leverage resources across a broad geography. Most importantly, these improvements in care delivery are positively impacting the lives of patients receiving behavioral health care within pediatric practices and primary care clinics.

COURSE OBJECTIVES:
• Discuss the growing need to integrate behavioral health services into ambulatory care settings
• Identify the benefits of a virtual model vs. co-location model; learning to do more with less
• Identify tools and measurements for evaluating the effectiveness of an integrated behavioral health program
• Review how standardization of screening tools and treatment algorithms are critical to improving patient care

SPEAKERS:
Martha Whitecotton, R.N, MSN, FACHE, Senior Vice President, Behavioral Health, Carolinas HealthCare System
Kathleen Rising, LPC, Manager, Behavioral Health Integration, Carolinas HealthCare System
Crystal Shirley, LCSW, Program Coordinator, Behavioral Health, Carolinas HealthCare System

WHOLE PERSON CARE FOR INDIVIDUALS WITH I-DD

One of the biggest challenges in the new design for Medicaid and State funded services will undoubtedly be successfully integrating physical healthcare and intellectual/developmental disability services. The goal will be to ensure that individuals with I-DD are a part of the larger health care system while still being offered an array of treatment and habilitation services that fits each individual’s needs. Participants will learn from national experts in I-DD treatments and supports and managed care about ways to balance reducing costs and increasing customer satisfaction/participation. Participants will hear about community partnerships around the country that have enhanced the lives of individuals with I-DD.

COURSE OBJECTIVES:
• Discuss the I-DD marketplace and its’ impact on the healthcare system
• Review the key system drivers that are shaping the future of services and the importance of engaging consumers in decisions that impact their own health and wellness
• Identify the primary physical health issues with the I-DD population and how to educate new partners in integrated care on I-DD services

SPEAKERS:
Derrick Dufresne, Founder and Senior Partner, Community Resource Associates, Inc. (CRA)
Donna Meltzer, CEO, National Association of Councils on Developmental Disabilities
Dan Ohler, Vice President of State & Local Government Programs, Optum

FACILITATOR: Chris Egan, Executive Director, NC Council on Developmental Disabilities

CONCURRENT SESSIONS
THURSDAY, DECEMBER 7, 2017
9:30 A.M. – 11:30 A.M.

REGISTER ONLINE: www.nc-council.org/december-conference
THURSDAY, DECEMBER 7, 2017
GENERAL SESSION
1:30 P.M. – 3:00 P.M.

MEDICAID RE-DESIGN IN NORTH CAROLINA: THE FUTURE IS NOW

Providers, LME/MCOs, consumers and advocates of the MH/I/DD/SUD system have several years of Medicaid managed care experience now. Even with this experience, there are many administrative and clinical changes underway to bring physical healthcare under a managed care model and to serve individuals using an integrated approach. Status quo will not be an option for providers and LME/MCOs. This session will provide an overview of the key elements of the Program Design for Medicaid restructuring, the revisions of the 1115 waiver and what impact it will have on the providers and LME/MCOs. In addition, the session will discuss the changes and next steps that providers and LME/MCOs may want to explore to remain viable in this changing environment.

COURSE OBJECTIVES:
• Discuss the administrative and clinical changes and the competencies required for implementation of Medicaid redesign in NC
• Identify strategies for determining provider service costs in a changing reimbursement market
• Describe the key elements in evaluating the potential of mergers, acquisitions and exploring the public/private partnerships
• Discuss ways in which the Program Design can incorporate Medicaid funded services as an entitlement with State funded services that are not an entitlement

PRESENTERS: Lanier Cansler, President, Cansler Collaborative Resources, Inc.; Tara Larson, Senior Healthcare Policy Specialist, Cansler Collaborative Resources, Inc.
IT’S WORTH THE INVESTMENT: HOUSING IS A HEALTHCARE STRATEGY

With the heightened attention to social determinants and given the challenges of meeting the housing requirements of the DOJ Settlement, LME-MCO’s are having to forge new partnerships and strategies to create access to safe and affordable housing. This workshop will discuss some of Alliance’s innovative landlord engagement strategies as well as our capital investment with CASA, a local developer, to establish an Olmstead preference for the next 15 years on a recently acquired property. CASA will also discuss ways to improve the coordination between property managers and providers to promote successful housing tenure.

COURSE OBJECTIVES:
- Describe how to cultivate both financial and collaborative partnerships with developers and landlords; discuss with local developer the strategies to improve partnerships with providers and LME-MCO’s; describe how Alliance developed a comprehensive landlord engagement and retention program including dedicated staff; discuss the critical role housing plays in meeting managed care goals.

PRESENTERS: Ann K. Oshel, Sr VP Community Relations, Alliance Behavioral Healthcare and Debra King, CEO, CASA.

USING THE POWER OF DATA TO MAKE DECISIONS

A provider agency’s intelligence is only as strong as the data that supports it. This session will focus on the planning and collection of data, use of data, data intensive dashboards, and how to apply the information when making decisions.

COURSE OBJECTIVES:
- Discuss and understand information gathering; review Data Driven Storytelling Best Practices; discuss and learn how to apply analytical principles for evaluation of business initiatives and clinical needs; and identify how to evaluate and identify performance improvement opportunities.

PRESENTERS: Carolyn Spence, Chief Information Officer, Alexander Youth Network and Jason Cagle, Senior System Architect, Alexander Youth Network.

AFTER THE HOSPITAL DISCHARGE: A COLLABORATIVE APPROACH TO INCREASE TIMELY FOLLOW UP

Interested in improving ambulatory follow up? You should be! Timely follow up from hospitalization is critical to an individual’s recovery, reducing the risk for re-admission to the hospital, and reducing the risk of emergency department services. This presentation will outline the successful implementation of a timely ambulatory follow up project with Partners BHM, CaroMont Health Systems and Outreach Management Services. The project started in November 2015, with the goal for at least 55% of individuals, each month, to attend a follow up visit within seven days of discharge from an inpatient setting.

COURSE OBJECTIVES:
- Describe ambulatory follow up; identify the implementation of the timely follow up project; discuss data-related outcomes; and identify lessons learned.

PRESENTERS: Leah Williams, DrPH, MPH, Research Director, Partners BHM; Char Biamonte, PhD(c) MA, BS, RN-BC, NE-BC, FACHE, Director of Psychiatric Services, CaroMont Health Systems; and Angela Dreher, Community Coordinator, Outreach Management Services.

INNOVATION THROUGH CONSULTATION: NORTH CAROLINA ACTIVITIES THAT ARE ADVANCING SERVICE INTEGRATION

Consultation services, already offered under the Innovations waiver, can promote collaborative team care for children and adults with I/DD and are aligned with the goals of integrated care, person-centered health communities, and improved quality and consistency of care. For consultation services to be effective they need to be multi-disciplinary, available and consistent, promote professional peer relationships, coordinate care across sectors, and address social determinants of health. Participants will hear about the successes and challenges identified in three approaches to consultation services underway in our state: NC START, Duke University Primary Care Pediatric Telephone Consultation demonstration pilot, and TEACCH Project ECHO demonstration pilot focused on increasing access to ASD specialty care in rural NC.

OBJECTIVES:
- Discuss core elements of effective and efficient consultation services; identify three established models of consultation service; discuss strategies to overcome challenges in implementing consultation services; and identify relevant outcomes of consultation services.

PRESENTERS: Jill Hinton, PhD, Licensed Psychologist, START consultant and Karen Luken, MS, Disability and Health Consultant.
ELEGANT BREAKFAST BUFFET

Conference attendees are treated to a wonderful breakfast buffet in the Pinehurst Resort’s Carolina Dining Room featuring - crystal chandeliers, live piano music, made to order omelets, fresh fruit and more. Attendees to the conference enjoy this as perk. Full Registration (breakfast included all 3 days) and 2 Day Registration (breakfast included for Wednesday & Thursday). Breakfast is not included for One Day Registrants.

GUESTS WILL BE ASKED TO SHOW A ROOM KEY OR BADGE TO VERIFY CONFERENCE REGISTRATION AND ACCOMMODATIONS AT THE RESORT.

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Please use the enclosed Hotel Reservation Form to register for your room or call group reservations at 1-800-487-4653 press #1 for group reservations.

ROOM BLOCK ENDS

November 6, 2017 after this date, rooms will no longer be blocked, but the room rate will still be in effect as long as space is still available. Extended Hotel Discount Rate – the discounted rate is good for 3 days before and after the conference.

Space in the main Carolina Hotel is limited, so please note, you may be accommodated at the Holly Inn, the Manor or other Pinehurst resort locations.

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Use the following address as your destination for the Pinehurst Hotel:
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1. Register online at and pay by credit card (Visa/MC ONLY).
2. Mail in registration form with check made payable to “NC Council of Community Programs.” Payment must be received no later than November 17, 2017.
3. Scan and email completed form to aviance@nc-council.org with check to follow.
Please mail checks to:
NC Council of Community Programs, 1135 Kildaire Farm Road, Suite 200, Cary, NC 27511
Registration questions – contact Aviance Robertson at (919) 657-0580 or aviance@nc-council.org.

REGISTRATION ENDS ON NOVEMBER 21, 2017. You may REGISTER ON SITE as space allows, email jean@nc-council.org to check on session availability.

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II. FEES

PRE-CONFERENCE SESSIONS – 12/5
CEO’s Guide to Understanding Cyber Security and Liability – How to Protect Your Organization........................................ 195
Leveraging Technology to Capture Outcomes and Demonstrate Value: Practical Approaches to Move to Value Based Care ................................................................. 195
Foundation for Success - An Optimized Electronic Health Record (EHR)................................................................. 195
NC’s Behavioral Health Crisis Referral System (BH-CRSys): A New System for Improving Crisis Placement........... 195

CONFERENCE FEES ...........................................................................
EARLY BIRD BY 10/31 AFTER 10/31
Full Conf. Registration (12/6-12/8) ........................................ $355 $380
(Conference meals, sessions, exhibits, reception and dance)
Two Day Conf. Registration ........................................ $300 $325 □ Wed □ Thurs □ Fri
(sessions, conf. meals & all special events)
One Day Conf. Registration ........................................ $175 $200 □ Wed □ Thurs
(sessions, lunch, exhibits)
Closing Plenary ONLY (no meal) ........................................ $150 $160
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III. CHOOSE SESSIONS

WEDNESDAY - SPARKING INNOVATION - CHOOSE ONE (X):
Hospital Partnership: Using Data-Predictive Analytics for Youth Interventions
Try Something New: Implement Whole Person Transitional Care
Better Information and Referral Services: Strengthening Access and Improving Outcomes
Enhancing Primary Care for Patients with Serious Mental Illness

WEDNESDAY – CONCURRENT SESSIONS – CHOOSE ONE (X):
Medicaid Managed Care: Understanding the Shift to a Value Based System
Serving Individuals with Complex Needs When Crisis Strikes
Looking Ahead - a Dialogue with Commercial Managed Care Plans
Child Welfare: Bridging the Gap Between Social and MH/I-DD/SUD Services
Connecting Value Based Services to Whole Person Care

THURSDAY – CONCURRENT SESSIONS – CHOOSE ONE (X):
Coordinating Local Human Service Structures to Strengthen Outcomes for Recovery
Locally Addressing the Opioid Crisis
Utilizing Emerging Virtual Care Methods to Improve Access to Care
Whole Person Care for Individuals with I/DD
Say It, Engage It: Building Leadership and Advocacy Skills for Families and Individuals

THURSDAY – SPARKING INNOVATION – CHOOSE ONE (X):
It's Worth the Investment: Housing IS a Healthcare Strategy
Using the Power of Data to Make Decisions
After the Hospital Discharge: A Collaborative Approach to Increase Timely Follow Up
Innovation through Consultation: NC Activities that are Advancing Service Integration

V. PLEASE INDICATE ANY SPECIAL ACCOMMODATIONS SUCH DIETARY RESTRICTIONS, WHEELCHAIR

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2017 ANNUAL CONFERENCE & EXHIBITION BOOKING ID # 51991
Tuesday, December 5 – Friday, December 8, 2017

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Check-In Time: 4:00 PM Check-Out Time: 12:00 NOON

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</table>

Cell Phone (_______) ___________ Business Phone (_______) ___________ E-Mail __________________________

SHARING ROOM WITH:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Cell Phone (_______) ___________ Business Phone (_______) ___________ E-Mail __________________________

CREDIT CARD INFORMATION TO GUARANTEE RESERVATION:

Credit Card Number ___________________________ Expiration Date _______ / _____ Security Code ______

Card Holder Name ____________________________________________

Card Holder Authorized Signature: ______________________________________

This signature gives Pinehurst Resort permission to charge a deposit and/or balance to the credit card number provided

Is the Credit Card for both Guests? Yes or No (Please Circle)

Will the Guest have the credit card with them at check-in? Yes or No (Please Circle)

Is the Credit Card for final payment? Yes or No (Please Circle)

If Yes, will Incidentals be charged to this card? Yes or No (Please Circle)