TRANSFORMATION TYPH & TOMORROW
Exhibition & Sponsorship Opportunities
December 4-6, 2019

TRANSFORMATION PRE-CONFERENCE SYMPOSIUM - December 3, 2019
Pinehurst Resort, Pinehurst, NC

i2iCENTER.org
PROGRAM AT A GLANCE

TUESDAY, DECEMBER 3
9:30 a.m. Exhibits Open
10:00 a.m. – 5:00 p.m. Transformation Pre-Con Symposium
Understanding Medicaid Transformation for Community Leaders: How to Prepare Today for Tomorrow
12:00 p.m. – 1:30 p.m. Lunch & Visit With Exhibitors
7:30 p.m. – 8:30 p.m. Early Conference Registration

WEDNESDAY, DECEMBER 4
6:30 a.m. - 9:30 a.m. Breakfast - Hotel Dining Room
Sponsored by Alexander Youth Network, Community Choices, Inc., Developmental Disabilities Resources, The Echo Group, Frye Regional Medical Center, Holly Hill Hospital, Integrated Family Services, Monarch, Old Vineyard Behavioral Health Services, Inc., RI International, SPARC Services & Programs, Therap Services, LLC, and Universal MH Services, Inc., WellCare
7:30 a.m. Registration Opens
8:30 a.m. – 5:00 p.m. Exhibit Hall Open
9:30 a.m. – 11:00 a.m. Opening Plenary
Triumph Over Adversity: Resilience and Recovery
Sponsored by Vaya Health
11:00 a.m. – 11:30 a.m. Session Break
Sponsored by Coastal Horizons Center, Integrated Family Services, Janssen, LifeSpan, Pride in NC, and SPARC Programs & Services, WellCare
11:30 a.m. – 12:30 p.m. Sparking Innovation
The Fusion Model:
An Innovation in Crisis
Increased Access to Behavioral Health Services in Primary Care to Improve Outcomes
Emerging Opportunities: Working with Non-Traditional Partners to Support Members of Standard or Tailored Plans
Transform Your Teams by Enhancing Partnerships between Operations and IT
12:30 p.m. – 2:00 p.m. Lunch Buffet | CAROLINA DINING ROOM
CARDINAL BALLROOM NORTH/ DOGWOOD ROOMS/ RYDER CUP LOUNGE
Sponsored by Alexander Youth Network, AmeriHealth Caritas, Autism Society of NC, NC Community Based Care, LLC, Community Choices, Inc., Children’s Hope Alliance, Developmental Disabilities Resources, The Echo Group, Frye Regional Medical Center, Holly Hill Hospital, Integrated Family Services, Janssen, Monarch, Relias, Therap Services, LLC, and Universal MH Services, Inc.
1:30 p.m. – 2:00 p.m. Lunch and Learn Trainings
Sponsored by MCNC and Netsmart
2:00 p.m. – 4:00 p.m. Concurrent Sessions
Alternative Payment Methods and the Value Proposition
Legal Updates 2019: Forging a Path Forward in a Time of Change
My Health, My Choices: Using Supported Decision-Making to Empower People with Disabilities to Play the Lead Role in their Health Care and Person Centered Planning
Buying Health in North Carolina: NCCARE360 and Healthy Opportunities Pilots
The Ombudsman – Your New Advocate in Managed Care
4:00 p.m. – 4:15 p.m. Breaks
Sponsored by Coastal Horizons Center, Integrated Family Services, Janssen, LifeSpan, Pride in NC, and SPARC Programs & Services, WellCare
4:15 p.m. – 5:15 p.m. Sparking Innovation II
Clinically Integrated Networks: Why Join a CIN?
When Opportunity Knocks: How to Successfully Procure Funding from the Division of MH/DD/SAS
SpeakUp! Building a System that Fosters Feedback and Drives Outcomes
ATLAS: Quality Measurement in Addiction Treatment
5:15 p.m. – 5:45 p.m. Ice Cream Sundae Reception with Santa
Sponsored by Rapid Resources for Families
6:30 p.m. – 7:30 p.m. Consumer Caucus
8:30 p.m. – Midnight Dance Party
Sponsored by Aymira Healthcare Technologies, Coastal Horizons Center, Janssen, LifeSpan, Pride in NC, Relias, Trillium Health Resources

THURSDAY, DECEMBER 5
6:30 a.m. - 9:30 a.m. Breakfast | HOTEL DINING ROOM
9:00 a.m. – 5:00 p.m. Exhibit Hall Open
9:30 a.m. – 11:30 a.m. Concurrent Sessions
Driving Success with I-DD Populations: Quality/Outcomes, Program Design, and Payment Innovations
Care Management under the BH/IDD Tailored Plan
Community Connections Model: Engaging and Improving Care
The Evolution of Peer Voices in North Carolina
11:30 a.m. – 12:00 p.m. Session Break
12:00 p.m. – 1:30 p.m. Lunch Buffet | CAROLINA DINING ROOM/CARDINAL BALLROOM/NORTH/ DOGWOOD ROOMS/ RYDER CUP LOUNGE
Sponsored by Aymira Healthcare Technologies, Brynn Marr Hospital, Coastal Horizons Center, GHA Autism Supports, GT Independence, NC Healthy Blue, RHA Health Services, Impresiv Health, Janssen, LifeSpan, Pride in NC, Relias, Seaide Healthcare, Sharenote. com, SPARC Programs & Services, Trillium Health Resources
1:00 p.m. – 1:30 p.m. Lunch & Learn Trainings
1:30 p.m. – 3:00 p.m. General Session
Information is Power: Latest on Medicaid Transformation
3:00 p.m. – 3:30 p.m. Session Break
Sponsored by Aymira Healthcare Technologies, CARF International, Carolina Complete Health, Integrated Family Services, Secure Telehealth, and SPARC Programs & Services, Trillium Health Resources
PROGRAM AT A GLANCE

3:30 p.m. – 4:30 p.m.
Sparking Innovation
SDOH: What Operations Will Look Like on the Ground
Utilizing the Crisis Response Continuum to Address the Opioid Epidemic in NC
Integrating Care with HIE Event Notification
Youth and Parent Peer Support: Best Practices for Recruitment, Employment, and Retention
Assessment Driven Decision making to Improve Outcomes in Child Mental Health Services

5:00 p.m. – 6:30 p.m.
Innovations Awards Reception
Sponsored by AmeriHealth Caritas, Alexander Youth Network, Autism Society of NC, Brynn Marr Hospital, Children’s Hope Alliance, Community Based Care, LLC, Community Choices, Inc., Developmental Disabilities Resources, Inc., The Echo Group, Frye Regional Medical Center, GT Independence, GHA Autism Supports, Holly Hill Hospital, Impressiv Health, Integrated Family Services, NC Healthy Blue, Monarch, RHA Health Services, Seaside Healthcare, Sharenote.com, SPARC Services & Programs, Therap Services, LLC, Universal MH Services, Inc., Virtual OfficeWare Healthcare Solutions, and WellSky

FRIDAY, DECEMBER 6
6:30 a.m. - 9:30 a.m.
Breakfast | HOTEL DINING ROOM
Sponsored by Brynn Marr Hospital, CARF International, Impressiv Health, GT Independence, GHA Autism Supports, RI International, Seaside Healthcare, Secure Telehealth, Virtual OfficeWare Healthcare Solutions, and WellSky
9:30 a.m. - 11:00 a.m.
Humanizing Healthcare

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TRANSFORMATION TODAY & TOMORROW

REGISTER ONLINE: i2icenter.org/events/conference
TRANSFORMATION TODAY AND TOMORROW

Conference & Exhibition - December 4-6, 2019
Pre-Con Transformation Symposium - December 3, 2019

WHY ATTEND THE CONFERENCE
North Carolina’s healthcare transformation, and its impact on systems and services is topmost on everyone’s mind, and for good reason. Starting February, 2020 Medicaid managed care will be underway across the entire state. This is a sea change that will affect 2.1 million citizens and create an entirely new system for consumers and service providers. i2i is focusing this year’s conference on Transformation Today and Tomorrow to highlight some of the changes, opportunities, and incentives possible with transformation. Whether through value-based care contracting, by creating innovations in integrated care, addressing social determinants of health, or incorporating peers into the service array, the hope is that transformation will improve care and address whole person needs. Recognizing that change of this magnitude also creates challenges, the conference further aims to offer stakeholders tools to use in the change process.

WHO SHOULD ATTEND?
Anyone preparing for the imminent start of Medicaid managed care for all healthcare in North Carolina who wants to better understand the new structures that will require a whole person approach, value-based performance, and new partnerships will want to attend the conference. This includes: Managed Care Organization leadership: CEOs, Managers, Directors, management staff, Board members; Provider Organization leadership: CEOs, Managers, Medical Directors, Clinical Directors, Quality Management staff, Service Coordinators; Healthcare Professionals and Administrators, State and Private Hospital leaders, Qualified Professionals, State Agency leaders, Department of Health and Human Service leaders, State and Local DSS leaders, Psychologists, Psychiatrists, Counselors, Licensed Clinicians, Social Workers, CFAC members, Consumers, Family Members, Advocates, Peer Support staff, County Commissioners, members of the General Assembly, and others interested in our system.

THIS CONFERENCE IS BEING CO-SPONSORED BY

Southern Regional AHEC
Area Health Education Center

EARN UP TO 11.50 HOURS OF CONTINUING EDUCATION CREDITS

Substance Abuse – 11.50 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 – 11.50 contact hours. 11.50 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 11.50 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.

ATTENDEES TELL WHY THEY ATTEND

WHO SHOULD ATTEND?

REGISTER ONLINE: i2icenter.org/events/conference
ARRAY OF SERVICES

- Mobile Crisis
- Psychiatric Service
- Outpatient Therapy
- Therapeutic Foster Care
- Community Respite

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www.integratedfamilyservices.net

CRITICAL INCIDENT STRESS MANAGEMENT (CISM)

A critical incident can be defined as any event that has a stressful impact sufficient enough to overwhelm the usually effective coping skills of an individual. Critical incidents are sudden and powerful events that fall outside the range of ordinary human experiences.

IFS’ CISM Team’s goal is to lessen the overall impact of acute or cumulative stress to accelerate recovery in individuals who are having a normal reaction to an critical incident while promoting dignity, respect and empowerment. For more information visit www.integratedfamilyservices.net/cism/

TRAINING SEMINARS & PROGRAMS AVAILABLE

The professional and competent staff at IFS is available to create custom training programs to meet your staffing needs, consultation and technical support. For more information, contact Natasha Holley or Mona Townes at 252-439-0700.

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1.866.437.1821 / 24 hours a day / 7 days a week
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Don’t have time during the conference? Spa discounts apply three days before and after the conference – come early or stay late!
FREE Massages
Enjoy a Free Massage Compliments of our Sponsors in the Exhibit Hall! The Pinehurst Spa’s Professional Massage Therapists will be on hand Wednesday and Thursday in the Exhibit Hall to relieve stress, aches, pains and just help you feel better!


Ice Cream Sundae Reception & Selfies with Santa!
Wednesday, December 4, 2019
Exhibit Hall - 5:15 p.m. – 5:45 p.m.
Sponsored by:

Dance Party!
Wednesday, December 4, 2019
8:30 p.m. – Midnight
Sponsored by:

Who does not love to get out and hit the dance floor once in a while? Come dance the night away with your friends and listen to a great mix of music from today and yesterday. Our group loves to line dance too!

Our DJ is John from Friendly Neighborhood DJ. Send John your song requests now!
VALUE ADDED RESOURCES

LUNCH & LEARN EVENTS
These 30 minute gatherings offer you more in-depth information about available resources that can assist with the move to managed care. After lunch, you can choose to participate in one of these trainings focused on a new service, technology product or resource you may need to be successful in NC’s new whole person care environment. Space is still available if you would like to host a Lunch & Learn, contact jean@i2icenter.org.

EXPERT RESOURCES
The Medicaid managed care transition is a heavy lift for many in the system and to help you with resources that can aid you in making the transition, the conference includes an Expo with over 100 organizations. These experts can connect you with the newest innovations in technology, clinical services, direct care, assistive technology devices, consulting, data management, financial services, insurance, pharmacy, inpatient care and much more. Professionals are available to talk to you all day Wednesday and Thursday. A list of participating expo vendors will be available on the i2i website in October.

TRANSFORMATION TODAY AND TOMORROW CONFERENCE APP – CONFPLUS
To offer you access to all conference information on your phone - we have a FREE APP that allows you to connect with other attendees and offers touch of a button access to – schedules, handouts, speaker information, evaluations, exhibitors and much more! Download it FREE to your iPhone or Android phone. APP Splash Page advertising Still Available!

CONSULTANTS ON CALL
This year, the Conference APP will make your attendance even more productive. A new feature will make it easy for you to connect with professional consultants available at the conference. You can start with a text, decide if you need more information and then set up a meeting while at the conference! Behavioral Health Crisis Referral System for the Division of MH/DD/SAS is already signed up, how about you? Email jean@i2icenter.org to get set up.

WHOLE PERSON CARE EXPO
Caring for the whole person requires the ability to go beyond coordinating behavioral, I-DD and physical healthcare. People are not defined by their diagnoses, and their recovery and health depend on a number of factors outside of treatment. Whole person care encompasses family, friends, work, community activities and inclusion, nutrition, exercise, spirituality, alternative treatment, and so much more. As Transformation continues, providers and payers will increasingly have opportunities to incorporate wellness factors to support consumers in their efforts to thrive and be productive community members.

The Whole Person Expo will offer attendees an opportunity to network and learn about community organizations that can be resources to help in the quest to support consumers to address their whole person needs. The Expo will be a free event for conferees and the public.
TRANSFORMATION PRE-CON SYMPOSIUM

10:00 A.M. - 5:00 P.M.

Understanding Medicaid Transformation for Community Leaders: How to Prepare Today for Tomorrow

TRANSFORMATION SYNONYMS: CONVERSION, METAMORPHOSIS, SHIFT

MEDICAID TRANSFORMATION

North Carolina is adopting a nationally recognized managed care model for Medicaid that includes whole person care and requires the integration of all sectors of healthcare, as well as integration with human services. Medicaid Transformation has already resulted in advancements in value-based care, social determinants of health and the use of advanced medical homes. And with each change, comes a change in Medicaid infrastructure that has impact at the community level. This symposium is geared specifically to local government, community agencies, and health and human service leaders who will be responsible for developing new partnerships, outreach, and business practices in order to operate in the new Medicaid managed care system.

WHY ATTEND THIS SYMPOSIUM?

Medicaid Transformation is scheduled to begin statewide on February 1, 2020 and its effect is far reaching for anyone who works with Medicaid consumers. Although information on these changes is available, many have not had the time to fully digest and connect the various pieces of information to feel fully informed and prepared to respond. This one-day event was created specifically to offer a condensed and targeted overview from State leaders on important aspects of the Medicaid Transformation Plan for those that work with Medicaid recipients in various capacities at the community level.

This symposium is DESIGNED to:

- Offer you details on the key aspects of Medicaid Transformation
- Help you understand how all the pieces fit together
- Discover how you and your community can respond in order to operationalize these changes locally.

The Target Audience for this symposium are the numerous community leaders and organizations that will be impacted by Medicaid Transformation, including:

- Rural Health, Federally Qualified Health Centers,
- Departments of Social Services, Special Education/School Mental Health, Primary Care Providers,
- Provider Organizations, County Commissioners,
- Independent Mental Health Practitioners, Direct Support Staff, Juvenile Justice, System of Care Professionals, and Court Officers. This event will also be of interest to people with lived experience and family members.

PRE-CON SYMPOSIUM CONTINUING EDUCATION EARN UP TO 4.25 HOURS OF CONTINUING EDUCATION CREDITS

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Social Workers and others – 4.25 contact hours. 4.25 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 4.25 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.
TUESDAY, DECEMBER 3, 2019
TRANSFORMATION PRE-CON SYMPOSIUM
10:00 A.M. – 5:00 P.M.

Understanding Medicaid Transformation for Community Leaders: How to Prepare Today for Tomorrow

This day-long symposium has been specifically developed to give community leaders whose work is impacted by Medicaid Transformation an opportunity to understand how some of the most critical parts of the evolving public healthcare systems in North Carolina are connected under Medicaid Transformation. This session will offer you important details about the impact on your community and what you should be doing now to prepare for the multifaceted changes that will take place in Medicaid’s health and behavioral health systems.

OBJECTIVES:
• Review the overall vision for Medicaid Transformation and how it will integrate care for North Carolina’s citizens and address Social Determinants of Health
• Define the differences between the benefit packages of the Standard Plan and Tailored Plans, including services, care integration, networks, regions, and role of the PHPs and LME/MCOs
• Review the Consumer Engagement and Outreach aspects of Medicaid Transformation
• Define the new quality of care aspects of Transformation that will involve outcomes and Value-Based Care, Advanced Medical Homes, Care Management Agencies and Clinically Integrated Networks
• Discuss the role of Social Determinants of Health and the expectation for community involvement in addressing these needs
• Identify how local communities will be impacted by Medicaid Transformation, how to prepare for the coming changes and your role in operationalizing and creating community partnerships and opportunities that will improve care for Medicaid recipients

MODERATOR:
TARA LARSON, Vice President, Cansler Collaborative Resources, Inc.

SPEAKERS:
DR. MANDY COHEN, Secretary, NC Department of Health and Human Services
DAVE RICHARD, Deputy Secretary for Medicaid, NC DHHS
KODY KINSLEY, Deputy Secretary for Behavioral Health and I-DD, NC DHHS
DEBRA FARRINGTON, Chief of Staff, NC Medicaid, NC DHHS
SARAH GREGOSKY, Deputy Director of Standard Plans NC Medicaid
SABRENA LEA, Associate Director NC Medicaid, LTSS, NC DHHS
KELSI A. KNICK, MSW, LCSW Senior Program Manager Population Health, NC DHHS
JAIMICA WILKINS, MBA, CPHQ, Senior Program Manager – Quality Management Division of Health Benefits, NC DHHS
AMANDA VAN VLEET, MPH Senior Program Analyst, Quality and Population Health, NC DHHS
SHERI MCCALL, Associate Director, Healthy Opportunities, Quality & Population Health, NC DHHS
TRANSFORMATION TODAY & TOMORROW

REGISTER ONLINE: i2icenter.org/events/conference

WEDNESDAY, DECEMBER 4, 2019
OPENING PLENARY SESSION
9:30 A.M. – 11:00 A.M.

Triumph Over Adversity: Resilience and Recovery

“The more we normalize brain health, the more we educate people. Hope helps heal. No matter the pain we are experiencing, life is a gift. Suicide Prevention is a social justice issue.” — Kevin Hines

In the Opening Plenary, Kevin Hines will share his story of hope and celebration of life. Kevin is a mental health advocate, global speaker, best-selling author, documentary filmmaker (Suicide The Ripple Effect) and entrepreneur who reaches millions with his story of an unlikely survival and his strong will to live. At the age of 19, two years after he was diagnosed with bipolar disorder, Kevin attempted to take his life by jumping from the Golden Gate Bridge. He is one of only thirty-four people (less than 1%) to survive the fall and the only Golden Gate Bridge jump survivor who is actively and globally spreading the message of living mentally healthy. Kevin will share his journey of recovery, resilience and wellness.

His compelling story has touched diverse, international audiences across colleges and universities, the primary and behavioral health communities, the military, at the corporate level, in law enforcement, and in local communities. Thousands have been impacted by his experience and will to live and credit him with helping save their lives.

OBJECTIVES:

• Identify successful methods to assist those living with mental illness to stay well
• Discuss proven strategies to assess wellness
• Review effective methods of suicide prevention
• Identify key factors that support mental health recovery
• Describe a 10 step process to monitor mental health wellness

SPEAKER:
KEVIN HINES,
Motivational Speaker and Wellness Advocate

OPENING PLENARY SESSION SPONSORED BY

ALEXANDER YOUTH NETWORK
Leading the way in children's behavioral healthcare.

AlexanderYouthNetwork.org
Humanizing Healthcare

“The health care system in the United States is edging toward a recalibration...Of essence to the health care industry is how to step up to a consumer-centric system.” — Deloitte

There are few industries in the US that can have such a significant impact on our individual lives and that of our families and friends as does healthcare.

The healthcare industry is a challenging environment ripe for radical changes. The healthcare industry continues to not always focus on whole person needs – emotionally, physically, mentally, financially, spiritually and socially. There have been numerous efforts to overhaul the healthcare system, but nothing has yet cured healthcare of its own illnesses.

In this conversation, we:

• Define the core problem in the healthcare ecosystem
• Introduce a new vernacular for healthcare
• Activate on 9 requirements that hardwire humanity at every point of care
• Describe new models for care removing barriers while engaging and activating consumers to optimize their health even when burdened by chronic conditions
• Discuss the 9 cultural changes for Humanizing Healthcare
• Identify the evolving macro changes in healthcare

We will examine the surprising inferences from Deloitte’s priority-ranked Consumer Survey. We will conclude our time by exploring the Future of Health based on healthcare humanized including the Activated Consumer, the Future Care Team, health plans as transformed partners supplying the glue of technology, data and communication, and the extended stakeholder ecosystem addressing drivers of health and healthfulness - joined in a Therapeutic Alliance.

The goal for sharing this content is to encourage us to create a culture whereby we are “continuously humanizing healthcare” as our core objective for this industry. The data shows that holding “Humanizing Healthcare” as our collective north star will positively impact all stakeholders – patients, providers, caregivers, executives and staff, employers, shareholders, and the government.

OBJECTIVES:

• Identify the actions to create a truly consumer engagement and activation environment
• Review strategies for engaging consumers in their own health to better achieve whole person care
• Understand the findings of research on the healthcare consumerism movement
• Recognize that the benefits of consumer engagement include measurable economic value
• Learn how ecosystem partners are working together to create a seamless experience for the healthcare consumer
SPARC Services and Programs custom designs programs for Managed Care Organizations and other Community Stakeholders to keep people out of expensive institutional care. We work with our customer to create innovative programming to keep individuals in community-based settings using nationally recognized evidenced based practices that affect social determinants of health. We offer value-based purchasing and shared risk contracting, and we have multiple locations across NC.

**SPARC Services & Programs Values**
- Work to keep people out of institutional care
- Be positive and solution-based
- Give and accept feedback appropriately, and grow
- Support the principles of System of Care
- Maintain great customer service
- Record what we do accurately and timely

**What Makes SPARC Different?**
- Value Based Purchasing with Shared Risk Contracting
- Strong Agency Culture
- Values Driven, Organically Grown Behavioral Health Organization
- Strong and Experienced Leadership
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- Innovative, 100% Paperless Electronic Health Record
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- Custom Designed Programs Available

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- Outpatient Therapy
- In Home Therapy Services (IHTS)
- Family Centered Treatment (FCT)
- Enhanced Crisis Response Program

**Adult Service Array (ages 18+)**
- Transition Management Services (TMS)
- Individual Supports

**SPARC Office Locations:**
Charlotte ~ Winston Salem ~ Burlington~ Statesville ~ Shelby ~ Troy

**Services & Programs Office** | 5200 Park Road, Suite 218B | Charlotte, NC 28209 |
| 866.700.1606 |
| [http://www.sparcprograms.net](http://www.sparcprograms.net) |
The Fusion Model: An Innovation in Crisis

Accomplishing fusion on Earth has been a holy-grail quest for clean bountiful energy. Science hasn’t been able to overcome the barrier of pulling two atoms together as happens within stars. In crisis care, like much of health care in general, we see clashes and resistances to merge culture and strategies between medical or hospital models and the recovery model. We offer the Fusion Model, an attempt to overcome these challenges and harness the power of fusing the best of both worlds.

OBJECTIVES:
Review the evolution of behavioral health services across the US and the challenges those in crisis face including inconsistent clinical guidelines and access to care; identify the principles and elements of NASMHPD’s sponsored crisis now initiative, including the current outcomes and successes at “no wrong door” facilities; discuss the contrasting types of crisis services available (both medical model and recovery model focus) and outcomes in different approaches; review the Fusion Model, a merging of the best aspects of the medical model and recovery model concepts as well as a fusion of “no wrong door” crisis access and high quality recovery focused care; and review the core components used at RI, International to accomplish the Fusion Model goals, including operations, peer integration, environment, and company culture.

Increased Access to Behavioral Health Services in Primary Care to Improve Outcomes

In an effort to decrease the burden and increase the bandwidth of primary care physicians in the community, Cone Health has adapted the Collaborative Care Model offering the primary care physician a customized work flow to meet the needs of their patients with virtual behavioral health and integrated behavioral health services. Not only do our patients benefit from increase and timely access to care; they show significant improvement in control of depression, anxiety and other high cost care diseases. Our virtual and embedded services bridge the gap, forming partnerships aimed at improving patients’ physical and mental health, reducing the cost of care at the same time.

OBJECTIVES:
Identify treatment modalities offered by Integrated Behavioral Health clinicians and Virtual Behavioral Health clinicians that increase access to care, early detection and improved patient outcomes; evaluate metrics provided by registries and reports that track tools for measuring depression, anxiety and volume of integrated behavioral health and virtual behavioral health services; and describe how to leveraged EMR’s functionality to capture evidence of integrated behavioral health care as part of the Collaborative Care Model in the primary care setting.
SPARKING INNOVATION

11:30 A.M. – 12:30 P.M.

Emerging Opportunities: Working with Non-Traditional Partners to Support Members of Standard or Tailored Plans

Addressing Social Determinants of Health (SDoH) are a major focus of health care in general and an exciting component of Medicaid Transformation. Not only are the Standard and Tailored Plans expected to screen and assess for SDoH, plans and behavioral health/IDD providers will need to collaborate with non-traditional partners to proactively link members with services and address any identified challenges. Local public health departments and county social service offices will play a vital role in meeting the requirements of delivering whole person care, addressing SDoH and having a comprehensive clinically integrated network (CIN). This session will highlight a successful collaboration between Forsyth County’s Department of Social Services Medicaid Intake Unit (DSS) and Department of Public Health that demonstrated improved participation in the Women’s Infant and Children’s (WIC) program and addressing the needs of youth and families in the child welfare system.

OBJECTIVES:
Discuss the role of the local Departments of Social Services and Public Health and provide a brief overview of programs offered that meet requirements outlined in the Standard Plan and expected in the Tailored Plan; describe the role of the local Public Health Department within Medicaid Transformation, specifically public health’s role in meeting the requirements of whole person care, SDoH and the clinically integrated network; describe the innovative collaborations between Forsyth County Department of Social Services and Public Health that have increased WIC participation (example of a value-based service and other innovative partnerships); and identify how to establish and nurture relationships with the public health department and MH/SU/IDD providers and families/individuals served.

Transform Your Teams by Enhancing Partnerships between Operations and IT

How often are your technology and business practices not effectively connected? During this session, Impresiv Health will walk participants through a five-step process of identifying system vulnerabilities that lead to project failure, and how to effectively drive positive change across operations and IT for success.

OBJECTIVES:
Define common business cases for implementing a business and technology transformation initiative; identify inefficiencies within your organization’s operations, and explain what it means to be a change agent; describe the ideal future alignment between operations, IT, and technology vendors; and recognize objectives of each transformation step and common barriers to reaching them.
Alternative Payment Methods and the Value Proposition

Following a national trend, supported by the federal government to reimburse for healthcare services in a way that balances the quality of care with the cost of care, providers and payers in North Carolina will be increasingly engaging in contracts that employ Alternative Payment Methods (APMs), sometimes called value-based contracting. APMs move the system away from paying for a unit of service that does not connect to the quality of the service or the outcome for the consumer. The goal of this shift is to encourage innovation that enhances the services for consumers moving away from “one-size-fits-all” payments. APMs do require a high business savvy and more sophisticated data capacity as well as a different organizational culture. Conferences will have an opportunity to learn more about the use of APMs under both the Standard Plan and the BH/IDD Tailored Plan. Is your organization doing all it can to be value-based? If not, plan to attend this session.

OBJECTIVES:
• Define Alternative Payment Methods and value-based contracting principles
• Understand the federal and state government expectations for APMs in Medicaid
• Identify the key areas of an organization that are changed by using APMs
• Discuss the types of risks associated with APMs and how to manage that risk
Legal Updates 2019: Forging a Path Forward in a Time of Change

Healthcare delivery in North Carolina is in the midst of a significant transformation that continues to affect the strategic concerns and day-to-day operations of providers, payers and other stakeholders in the healthcare industry. In this session, Robinson Bradshaw attorneys will provide an update on legal developments in 2019 affecting industry stakeholders and will offer practical advice on how to prepare for and adapt to these changes. In particular, the panel will cover the status of North Carolina’s Medicaid transformation and implementation process. In conjunction, the panel will provide a primer on the fundamentals of contracting and a deep dive into value based contracting, including key terms and best practices.

OBJECTIVES:
• Discuss changes to key laws affecting stakeholders in the behavioral healthcare space such as appeals processes under the Standard Plan including provider contract issues and consumer appeals for adverse service determinations
• Review recent legal developments related to North Carolina’s Medicaid transformation and implementation process
• Identify the fundamentals of successful managed care contracting
• Define the essentials of value based contracting, including key terms and best practices

My Health, My Choices: Using Supported Decision-Making to Empower People with Disabilities to Play the Lead Role in their Health Care and Person Centered Planning

In this session, the audience will learn ways to empower people with disabilities to play the lead role in their health care and person centered planning through Supported Decision-Making (SDM). In SDM, people with disabilities work with people they trust, including families, friends, and professionals, to help them understand their situations and choices so they can make their own decisions and direct their lives. In this session, the audience will learn strategies for using SDM as a way of maximizing people’s self-determination, independence, and quality of life and health care.

OBJECTIVES:
• Discuss the importance of self-determination for people with disabilities and how it is directly related to their quality of life and health
• Review how Supported Decision-Making can enhance self-determination and improve life outcomes, including health
• Identify and use strategies to empower people with disabilities to use Supported Decision-Making to play the lead role in their health care and person centered planning and supports
Buying Health in North Carolina: NCCARE360 and Healthy Opportunities Pilots

North Carolina DHHS is setting a new vision by asking: How can the State’s resources be optimized to buy health, not just healthcare? Two foundational pieces of North Carolina’s strategy to truly integrate healthcare and human services to achieve the goal of health are the NCCARE360 and the Healthy Opportunities Pilots.

NCCARE360 is the first statewide coordinated care network to electronically connect people with identified resource needs to community organizations like food banks and allow for a feedback loop on the outcome of that connection. The Healthy Opportunities Pilots will present an unprecedented opportunity to test the impact of providing select, evidence-based non-medical interventions to higher-risk Medicaid managed care enrollees with a focus on housing, food, transportation and interpersonal safety and toxic stress that directly impact the health outcomes and health care costs of enrollees. Two to four geographic areas of the State will be able to access up to $650 million in federal and state Medicaid funding to make this happen. This session will help you understand how the program will operate and how you can be a part of this new vision.

OBJECTIVES:

• Define the Healthy Opportunities Pilot model that will be used in North Carolina and the timelines for implementation
• Discuss the different roles within the Healthy Opportunities Pilots including the Lead Pilot Entity and Human Service Organization
• Understand how NCCARE360 can be used by stakeholders across the State

The Ombudsman – Your New Advocate in Managed Care

The Ombudsman Program is a pivotal part of the Medicaid Transformation as their role is to ensure that consumers are able to resolve issues that arise in their Medicaid services and, more specifically, to advocate for consumers and to assist them in appeals and grievances. In addition, the Ombudsman will be in a position to recognize when there are systemic issues that need to be addressed by NC DHHS and other important stakeholders. This session is an opportunity for attendees to learn more about the Ombudsman Program, to understand the possibilities of what an ombudsman can do to assist consumers, and to identify how providers can interact with the ombudsman.

OBJECTIVES:

• Discuss the functions of the Ombudsman
• Review how other states have used the Ombudsman Program
• Define the difference between the role of the Ombudsman and the Enrollment Broker
• Identify ways in which the Ombudsman can assist consumers
• Describe ways in which the Ombudsman can work with providers
Clinically Integrated Networks: Why Join a CIN?
Community Care Physicians Network (CCPN) is a clinically-integrated network (CIN) of independent providers dedicated to improving quality, providing value to payers and patients, and keeping doctors and clinicians in control of the care their patients receive. As the healthcare system evolves and physicians are paid based on the quality of care they provide rather than the number of patients they see, CCPN will allow North Carolina’s independent providers opportunities to share best practices, improve quality of care for their patients, and participate in payer contracts which have been negotiated for the benefit of patients and providers, not an administrative third party. CCPN is comprised of over 2,600 clinicians in almost 900 locations who have joined together to create an organization where practices can thrive in the changing healthcare payment reform environment. This presentation will address the benefits membership in CINs offers your agency and will provide the attendee with the opportunity to discern the impact CCPN can have on their agency’s care and outcomes.

OBJECTIVES:
Describe how membership in a CIN can improve your agency’s clinical performance outcomes while supporting payment structures that allow for the growth of your business; review how the use of data a CIN can provide will simplify the identification of your practice’s approach to understanding your clinical performance measures, patient utilization, and response to patient care in real-time; describe how providers working within one network along with Care Management can improve patient care while enhancing the clinician experience.

When Opportunity Knocks: How to Successfully Procure Funding from the Division of MH/DD/SAS
The Division of MH/DD/SAS is the leader for behavioral health and I/DD policy for the state of North Carolina. Through the lens of behavioral health, the Division aims to lead with ideas to identify gaps, invest in promising interventions, and efficiently scale a system that promotes health and wellness for all North Carolinians across all payers, providers, and points of care. The Division has a $600 million budget and has management and oversight of over 120 contracts totaling $70+ million annually for services across the state. Over the next few years, the Division anticipates an increased number of funding opportunities for organizations to partner with us to help meet the BH&IDD needs of North Carolinians. This session will provide you more information on how you can partner with them.

OBJECTIVES:
Discuss the existing sources and uses of the Division of MH/DD/SAS budget; review the Division’s future spend strategy and roadmap for contracts; discuss how to identify and apply for funding opportunities; and review what to expect once funding is awarded.
SpeakUp! Building a System that Fosters Feedback and Drives Outcomes

SpeakUp! is a case study of how to create both the systems and the company culture necessary to create a consistent flow of feedback about your services from the consumers and families that receive them. Learn how to create an environment that listens for and embraces feedback at all levels. We will discuss several different business systems that help focus teams to become feedback friendly and metrics driven. From there the session will cover options for automating the feedback process and making it accessible to all stakeholders. Lastly, we will explore the various ways that agencies can put stakeholder feedback into action to create value for the agency and those that they serve.

OBJECTIVES:
Review the value of harnessing ideas and opinions from consumers and leveraging them to make your agency stronger; discuss the key cultural changes required to build a feedback friendly agency; and identify several options for implementing a feedback system in your agency from low/no cost to paid services.

ATLAS: Quality Measurement in Addiction Treatment

Addiction can be treated with the same effectiveness as other chronic diseases, but the use of evidence-based best practices varies widely across the addiction treatment field. Public-facing quality measurement systems currently exist for many other areas of health care. These platforms bring transparency and information on facility quality and best practices to the public, which can help guide individuals’ decisions and navigate through potential misinformation. No such system exists for addiction treatment. This session will provide an overview of how ATLAS will respond to this gap by standardizing quality expectations for addiction treatment facilities across all levels of care and types of treatment, and current ATLAS progress. ATLAS will be a free web-based platform that will be the result of a collaborative process that engages providers, payers, policymakers, recovery and family advocates, and other key stakeholders along the entire addiction treatment continuum. It is this collaboration that will allow ATLAS to truly impact Substance Use Disorder Public Policy. Insights from this session may facilitate future quality improvement work for addiction treatment.

OBJECTIVES:
Describe the National Principles of Care and their importance in the addiction care space; identify gaps in the current addiction treatment system and how ATLAS responds to these; and review the future steps for ATLAS and potential areas for collaboration.
THURSDAY, DECEMBER 5, 2019
CONCURRENT SESSIONS

9:30 A.M. – 11:30 A.M.

Pro-Active Value-Based Contracting

It’s clear that use of value-based contracts (VBC) will be expanding in North Carolina. Value-based contracting is a broad term that can be implemented in a multitude of different ways. How will it be defined by your organization? This session is an opportunity to hear from a large provider organization that serves individuals from many States on how they took the initiative to embed a value-based model in the mission of their organization and in all of their service delivery. From creating data metrics to gaining staff commitment to a focus on outcomes to negotiating contracts, this provider agency spearheaded that transition within their organization and in their relationship with payers. Grafton Integrated Network serves individuals from across the mid-Atlantic region of the US, working with an array of payers and funding sources.

OBJECTIVES:
- Review ways to take the lead on the delineation of rules around your value-based contracts
- Identify how to define the “value” in a VBC proposal
- Define strategies for negotiating a value-based contract
- Discuss “practice-based evidence” that strengthens the reliability of your data and assessments

Driving Success with I-DD Populations: Quality/Outcomes, Program Design, and Payment Innovations

There is a growing national trend to use Medicaid managed long-term services and supports (MLTSS) to deliver care to complex populations. However, States have only recently begun to include people with intellectual and developmental disabilities (I-DD) in their MLTSS models. As MLTSS expands to I-DD populations, it is critical to establish evidence-based quality standards and guidance about managed care provision for people with I-DD.

In this shift, how can you ensure that people are having a meaningful life? What are the evidence-based quality measures that will help assess if it is actually happening? What impact will this have on alternative payment models, such as value-based reimbursement? This session will examine the role of quality in the transition to MLTSS, sharing key factors to consider in the pursuit of an ideal service system. We will also explore the role that social determinants of health can play, specifically how they can positively impact allocation of resources, strategic directives, specific supports, and personal quality of life.

OBJECTIVES:
- Identify the connection between quality long-term systems and supports and traditional health care metrics
- Discuss various ways providers can demonstrate quality, or value for people with I-DD
- Review how PHPs are implementing alternative payment models for I-DD providers

SPEAKERS:
SCOTT ZEITER,
Executive Vice President and Chief Operating Officer, Grafton Integrated Health Network

VANESSA LANE,
Vice President of Revenue Cycle Management and Data Analytics, Grafton Integrated Health Network

LINDSEY CROUSE MITROOK,
Director of Value-Based Care, Healthcare Analytics for AmeriHealth Caritas Corporate Office

MARY KAY RIZZOLO,
President and CEO, Council on Quality and Leadership (CQL)
THURSDAY, DECEMBER 5, 2019

CONCURRENT SESSIONS

9:30 A.M. - 11:30 A.M.

Care Management under the BH/IDD Tailored Plan

The function of care management is an integral piece of the managed care puzzle. Care management is the multi-disciplinary team-based service that will coordinate all the physical and behavioral services, long-term services and supports, pharmacy and unmet health care needs for Medicaid beneficiaries and for those who are part of the BH/IDD Tailored Plan. This whole-person care approach is a focus of the Tailored Plan, where every individual in a Tailored Plan will receive care management. The NC DHHS vision is to certify specific organizations that meet qualifications and this includes BH/IDD providers and Advanced Medical Homes (AMH). This is a new product line for providers and requires some thoughtful planning prior to implementation. This session will provide conferees with the latest information from DHHS on the Care Management Agency (CMA) and AMH+ concepts. Conferees will spend much of the time delving into the business decisions, structures and policies needed to be a CMA or AMH+.

OBJECTIVES:
• Discuss the NC DHHS plan for care management under the BH/IDD Tailored Plan
• Identify the difference between an AMH+ and a Care Management Agency
• Review the key business components needed to offer care management services
• Identify next steps for your organization

Community Connections Model: Engaging and Improving Care

Innovative and non-traditional partnerships are increasingly important in addressing community health issues. This session will describe the Community Connections model employed by WellCare and how it can be leveraged by peer support to fully engage members in their treatment and recovery within their community. Using strong collaborative relationships between members, advocates, state granting entities, community resources, and hospital and community providers, WellCare and our partners were able to provide highly effective peer support recovery coaches armed with numerous community resources to individuals in inpatient and crisis settings for opioid use disorders. This session will review the success of this program in New Jersey, where 94% of the individuals who met with peer support recovery coaches in inpatient and crisis settings became engaged in recovery supports and treatment services.

OBJECTIVES:
• Describe the impact that various social services can have on members’ treatment engagement and long-term recovery support
• Identify opportunities for collaboration among diverse entities, with the goal of increasing member empowerment and recovery
• Demonstrate the effectiveness of the Community Connections collaborative model to address healthcare gaps for underserved populations
• Discuss how to replicate the model to address your communities unique needs

SPEAKERS:
DANIEL BROWN, MHA, MSW, LCSW, Executive Management Specialist, Cansler Collaborative Resources, LLC

BEN MILLSAP, LCSW, LCAS, CCS, Senior Mental Health/Substance Use Clinical Specialist, Cansler Collaborative Resources, LLC

KELSI KNICK, Senior Program Manager Population Health, NC Medicaid, NC DHHS

*Care Management Provider TBA

SPEAKERS:
COURTNEY CANTRELL, PHD, Senior Director of Behavioral Health, WellCare of North Carolina WellCare Health Plans

SHAUNE LANCITT, NC Community Relations for WellCare

AVIVA WOOG, New Jersey Community Relations, WellCare
The Evolution of Peer Voice and Their Impact in North Carolina

Our healthcare system has not always listened or heard the voices of people with behavioral health problems in North Carolina. This may be changing because we now have a new statewide consumer organization called Peer V. O. I. C. E. NC. This statewide peer movement is; advancing peer leadership and engagement, coordinating existing efforts to build qualified and competent peer professionals and providers, and improving mental health and substance use recovery.

Peer V. O. I. C. E. NC is also partnering with others to create additional value within an integrated healthcare system. The combination of Peer Support Services and other responses to the social determinants of healthcare can achieve significant impact on the lives of many people served by our integrated healthcare system. This session will cover the details of how Peer V. O. I. C. E. NC can impact Medicaid Transformation and how you can be a part of this movement.

OBJECTIVES:

• Discuss why North Carolina was selected and funded by SAMHSA to create a statewide consumer organization
• Review what Peer V. O. I. C. E. NC aspires to accomplish and how we will meet its goals
• Define what peers, providers, payers, state agencies, and others can do to support the goals of Peer V. O. I. C. E. NC
• Discuss how to combine peer support with other services and responses to social determinants of healthcare to create a major impact
Information is Power: Latest on Medicaid Transformation

Given the many facets of Medicaid Transformation, being up-to-date with new information can be difficult. Information is power, and all stakeholders affected by the shift to Medicaid managed care should understand the vision and know the latest information on the transformation. North Carolina’s 2019 budget impasse has changed the plan for a staggered implementation of the Standard Plan, and now the entire state will go live with Medicaid managed care in February. This single, full-scale implementation heightens the need for a well-managed transition. In this session, plan to hear from NC DHHS leaders about the status of Medicaid Transformation and what to expect in 2020.

OBJECTIVES:

• Review the state’s progress on preparing for the Standard Plans to go live on February 1, 2020.

• Review new details on the Tailored Plan design and how it will impact beneficiaries, providers and various populations.

• Review the latest information on key components of transformation such as Care Management Agencies, the AMH/AMH+, the Ombudsman Program, additional specialty plans for populations like foster children, PHP networks and more.

SPEAKERS:

DAVE RICHARD, Deputy Secretary for NC Medicaid, NC DHHS

KODY H. KINSLEY, Deputy Secretary for Behavioral Health & Intellectual and Developmental Disabilities, NC DHHS

DEBRA C. FARRINGTON, MSW, LCSW, NC Medicaid Chief of Staff, NC DHHS
THURSDAY, DECEMBER 5, 2019
SPARKING INNOVATION
3:30 P.M. – 4:30 P.M.

SDOH: What Operations Will Look Like on the Ground
NC Medicaid Transformation creates opportunities for Medicaid to pay for human and social services that impact health. North Carolina is the first state in the country to implement a groundbreaking program with such comprehensive interventions embedded into its health care. NC is leading the nation, benefiting Medicaid recipients and steering the country into delivering improved health outcomes through the integration of health care and human services. This session will look at the experience and efforts of Healthy Opportunities of the Piedmont (HOOP), a community-driven effort that has led to the selection of Piedmont Triad Regional Council (PRTC) to apply as a Lead Pilot Entity (LPE).

OBJECTIVES:
Discuss the establishment of a local pilot governance model; review the development and administration of a Human Service Organization (HSO) Network; Identify Human Service Organization (HSO) Network Standards; and discuss the assessment of further Technical Assistance such as: Financial Modeling Efforts, HSO Capacity Building and Integrating NCCARE360 into existing HSO processes

Utilizing the Crisis Response Continuum to Address the Opioid Epidemic in NC
The opioid epidemic has become national news. Overdoses are on the rise and every level of our communities are being affected. Grant funding is being made available for communities and individuals who are identified with this need in staggering numbers. Communities are developing task forces, piloting projects, and attempting to address this challenge to the community in the best way that they can with focus being placed on the individual identified with the diagnosis. This presentation will showcase how utilizing the crisis response continuum has assisted with addressing access to care disparities for individuals with opioid use disorder. It will focus on the values that have been infused into treatment for individuals who are identified with opioid use disorder including open access to care for all individuals, appropriate determination of treatment needed, and recovery oriented care as well as reaching individuals when they are in a behavioral health crisis.

OBJECTIVES:
Discuss the national opioid epidemic including research, statistics, and data regarding overdose rates, access to care rates, and other statistics related to this national concern; define the disparities in the system with access to care rates, levels of treatment recommended, lack of recovery principles within treatment programs as well as lack of family involvement in treatment; and identify how to leverage current community resources including the crisis response continuum to provide access to recovery oriented treatment for individuals with opioid use disorder.

SPEAKERS:
TIM J. GALLAGHER, MPH, FACHE, PMP,
Program Manager,
Health Opportunities of the Piedmont

BLAIR BARTON-PERCIVAL, Aging
Director, PRTC Area Agency on Aging

SPEAKERS:
DR. CHARLES BROWNING, Chief
Medical Officer of RI International

JOY BRUNSON-NSUBUGA, MA, LMFT, LCAS, CCS,
AAMFT, Recovery Services Administrator II, RI International

AMANDA M. BURRAFATO,
Licensed Marriage and Family Therapist and Licensed Addiction Counselor, RI International
Integrating Care with HIE Event Notification

NC HealthConnex, the North Carolina state-designated Health Information Exchange (HIE), offers two flagship services that allow health care providers to bridge the gap to whole person care. These services are fundamental to help North Carolina’s health care providers shift to value-based and whole person care models and are already giving health care providers new ways to view their patients’ health and well-being holistically. During this session, the presenters will demo the Clinical Portal and explain how enrolling to receive event notifications via NC*Notify can improve care coordination and service delivery.

OBJECTIVES:
Discuss the requirements for connectivity to NC HealthConnex, including specific data targets for Behavioral Health/IDD; review how to utilize the clinical portal to access a more complete, longitudinal health record of patients; and discuss how to utilize the NC*Notify event notification service.

Youth and Parent Peer Support: Best Practices for Recruitment, Employment, and Retention

As states increasingly support flexibility in defining services, promote value-based contracting, and encourage payers to seek new ways to meet the needs of their patients, opportunities to engage youth and family peer support are growing rapidly. Prioritizing youth and family peer support staff qualifications that include lived experience in addition to traditional ones like education requires forethought and planning and has implications for workplace culture. The Community Behavioral Health Clinic is one example of a setting especially well-suited for the inclusion of youth and parent peers, whose support for consumers is proving to be invaluable. Successful staffing efforts go beyond service considerations and include administrative and community considerations, areas that will be addressed in this session. And based upon experiences across national networks of youth and family organizations and peer support programs, this workshop will offer strategies for implementation.

OBJECTIVES:
Discuss the infrastructure components for successful youth and parent peer support programming; review Peer “buy-in” and agency culture as a critical part of workplace success; discuss recruiting, hiring and supervising staff with lived experience as a caregiver of a child/youth with behavioral health challenges; describe Youth and Family Peer Support roles and dynamics when working together with families.
Assessment Driven Decision Making to Improve Outcomes in Child Mental Health

Two years ago Children’s Hope Alliance implemented the use of the validated, comprehensive, outcomes assessment, the Treatment Outcome Package (TOP) to identify gaps in services and evaluate progress over time. This instrument has been integrated into our clinical workflow and completed for over 1,000 clients by clients themselves and other raters (e.g., foster parents), yielding reports with actionable insights. We have also begun piloting a new Level of Need tool that uses TOP data to recommend customized care for clients across the care continuum. To reduce dependence on residential care, we will start an alternative MCO-approved community-based program, Child ACTT, this fall.

OBJECTIVES:
Review two benefits of a multiple rater assessment of child behavioral health outcomes; describe the four key dimensions of Level of Care; and discuss three characteristics of the Child Assertiveness Community Treatment Team (ACTT) model.

SPEAKERS:
KIMBERLEE J. TRUDEAU, PH.D., Director of Research at Outcome Referral, Inc.
LAKISHA MARELLI, CHC, Chief Information Officer and leader of the Quality Improvement, Management Information Systems Team, Children’s Hope Alliance.

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Providing Comprehensive Mental
Health and Substance Use Services

www.rhahealthservices.org

www.hilltop.org

TRANSFORMATION
TODAY & TOMORROW

REGISTER ONLINE: i2icenter.org/events/conference
THANK YOU i2i FRIENDS

SOLVES

solve - verb
find an answer to, explanation for, or means of effectively dealing with (a problem or mystery).

ShareNote.com | contact@sharenote.com | (330) 792-0422

WellSky
Streamline every step of I/DD care.
The Direct Care Module for WellSky Behavioral Health & I/DD Providers
Streamline scheduling, simplify documentation, and ensure compliance through system validations. The WellSky Direct Care Module helps you seamlessly manage community based care while on the go.
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CENTRICITY™ PRACTICE SOLUTION
A fully integrated EHR and Practice Management solution creating healthier and safer outcomes for behavioral health.

One solution efficiently supporting your clients’ needs...
Behavioral & Primary Health Integration
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LIKE YOURS
IMPROVE PERFORMANCE ACROSS OPERATIONS
Whether you’re an ACO, a health plan, a TPA, or a software vendor, Impressiv Health offers services and solutions to bridge operational and technical gaps by creating the right-fit solution.

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CONSULTING & STAFFING
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www.impressivhealth.com
CONFERENCE REGISTRATION FORM
December 4-6, 2019
Provider Success Symposium - Pre-Con December 3, 2019
Pinehurst Resort, Pinehurst, NC

HOW TO REGISTER
1. REGISTER ONLINE and pay by credit card (Visa/MC or AMX).
2. Mail in registration form with check made payable to “i2i Center for Integrative Health.” Payment must be received no later than Nov. 14, 2019.

Registrations received without check or purchase order will not be processed until check is received.

i2i Center for Integrative Health
1135 Kildaire Farm Road, Suite 200, Cary, NC 27511.

REGISTRATION QUESTIONS
Contact Aviance Robertson at (919) 657-0580 or aviance@i2icenter.org

ONLINE REGISTRATION ENDS ON NOVEMBER 14, 2019.
You may REGISTER ON SITE as space allows, email jean@i2icenter.org to check on session availability.

CANCELLATIONS
A 25% refund is available on registrations cancelled before November 1st. No registration refunds will be made after November 1st. To receive any refund, you must email Aviance Robertson before the November 1st. Registration for a staff member unable to attend may be transferred to another individual with no penalty by contacting Aviance Robertson.

PRE-CON SYMPOSIUM | 12/3
□ Understanding Medicaid Transformation for Community Leaders: How to Prepare Today for Tomorrow

□ FULL REGISTRATION | 12/04 - 12/06
(Conference meals, sessions, exhibits, reception and dance)
□ TWO DAY REGISTRATION
(Sessions, conf. meals & all special events)
  ○ Wednesday  ○ Thursday  ○ Friday
□ ONE DAY REGISTRATION
(Sessions, lunch, exhibits)
  ○ Wednesday  ○ Thursday

□ CONSUMER OR FAMILY MEMBER
Take 50% off registration rates

□ FULL TIME GRADUATE STUDENT
Take 50% off registration rates

□ CONSUMER FAMILY/COMPANION (meals ONLY)$65/day $65/day

TOTAL AMOUNT ENCLOSED $________

Please print or type clearly.

CIRCLE (Mr. / Mrs. / Ms.) NAME: ________________________________

ORGANIZATION: ________________________________ TITLE: ________________________________

BILLING ADDRESS: ________________________________

CITY: ___________________ STATE: __________ ZIP: __________________

MAILING ADDRESS SAME AS BILLING?  ◯ Yes  ◯ No

MAILING ADDRESS: ________________________________

CITY: ___________________ STATE: __________ ZIP: __________________

PHONE: ___________________________ FAX: ___________________________

EMAIL: ___________________________

VEGETARIAN MEALS REQUIRED: ◯ Yes  ◯ No

Please indicate any special accommodations such dietary restrictions, wheelchair

Please email jean@i2icenter.org if you require a sign language interpreter or sighted guide.

CONTINUED ON BACK
WEDNESDAY | SPARKING INNOVATION (CHOOSE ONE)
□ The Fusion Model: An Innovation in Crisis
□ Increased Access to Behavioral Health Services in Primary Care to Improve Outcomes
□ Emerging Opportunities: Working with Non-Traditional Partners to Support Members of Standard or Tailored Plans
□ Transform Your Teams by Enhancing Partnerships between Operations and IT

WEDNESDAY | CONCURRENT SESSIONS (CHOOSE ONE)
□ Alternative Payment Methods and the Value Proposition
□ Legal Updates 2019: Forging a Path Forward in a Time of Change
□ My Health, My Choices: Using Supported Decision-Making to Empower People with Disabilities to Play the Lead Role in their Health Care and Person Centered Planning
□ Buying Health in North Carolina: NCCARE360 and Healthy Opportunities Pilots
□ The Ombudsman – Your New Advocate in Managed Care

WEDNESDAY | SPARKING INNOVATION II (CHOOSE ONE)
□ Clinically Integrated Networks: Why Join a CIN?
□ When Opportunity Knocks: How to Successfully Procure Funding from the Division of MH/DD/SAS
□ SpeakUp! Building a System that Fosters Feedback and Drives Outcomes
□ ATLAS: Quality Measurement in Addiction Treatment

THURSDAY | CONCURRENT SESSIONS (CHOOSE ONE)
□ Pro-Active Value-Based Contracting
□ Driving Success with I-DD Populations: Quality/Outcomes, Program Design, and Payment Innovations
□ Care Management under the BH/IDD Tailored Plan
□ Community Connections Model: Engaging and Improving Care
□ The Evolution of Peer Voices in North Carolina

THURSDAY | SPARKING INNOVATION (CHOOSE ONE)
□ SDOH What Operations Will Look Like on the Ground
□ Utilizing the Crisis Response Continuum to Address the Opioid Epidemic in NC
□ Integrating Care with HIE Event Notification
□ Youth and Parent Peer Support: Best Practices for Recruitment, Employment, and Retention
□ Assessment Driven Decision making to Improve Outcomes in Child Mental Health Services
We look forward to welcoming you to Pinehurst! Reservations will be accepted until Monday, November 4th or until the guest block is full, whichever comes first. Pinehurst consists of a variety of accommodations including the Carolina, Villas, Holly Inn, The Manor Inn and Condominiums.

**DAILY RATES:** European Plan  
**LOCATION:** Resort Accommodations  
The resort will make every effort to honor specific room requests. If your request is not available, the best substitution will be made. Rooms will be assigned to building locations in the order the reservations were made.

Please indicate the number of adults in the room  
**Single or Double Occupancy** $109.00 per room, per night  
Rates are per room, per night and include your accommodations only.

- Arrival Date ___________________________  Departure Date ___________________________
- Check-In Time: 4:00 PM  
- Check-Out Time: 12:00 NOON  

**RESORT SERVICE FEE & STATE SALES TAX:** A 10% resort service fee will be added to your account. State sales tax of 6.75% and occupancy tax of 3% are additional.

**DEPOSIT AND CANCELLATION POLICY:** A deposit representing one night’s rate per person is charged at the time the reservation is made. Pinehurst must receive notice of any cancellation at least 30 days prior to date of arrival in order to refund a deposit.

**Reservations may be made via email, phone, fax, or mail:**
- **Email:** Group.Reservations@pinehurst.com  
- **ToH-Free:** 855-287-1286  
- **Fax:** (910) 235-8240  

**PINEHURST RESORT: ATTN GROUP RESERVATIONS**
- **PO BOX 4000**  
- **VILLAGE OF PINEHURST, NC 28374-4000**

**ROOMS TO BE OCCUPIED BY:** (Type or Print all names)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cell Phone (___)</td>
<td>Business Phone (___)</td>
<td>E-Mail</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SHARING ROOM WITH:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<td>Business Phone (___)</td>
<td>E-Mail</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

Will Incidental be charged to this card?  Yes or No (Please Circle)