The 16th Annual National Behavioral Health Information Management Conference and Exposition

Addressing the Needs of Mental Health, Alcohol, and Other Drug Programs

Conference Program

April 27–28, 2016

Hyatt Regency Orange County
11999 Harbor Blvd
Garden Grove, CA 92840
PRESENTER BIOGRAPHIES
AND HANDOUTS ARE AVAILABLE AT:
www.cibhs.org/events
## PROGRAM AT-A-GLANCE

### WEDNESDAY, April 27, 2016

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### THURSDAY, April 28, 2016

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The National Behavioral Health Information Management Conference and Exposition

WEDNESDAY, April 27, 2016

8:15 AM – 5:15 PM  REGISTRATION .................................................. Grand Foyer
8:15 AM – 10:00 AM  CONTINENTAL BREAKFAST AND EXHIBIT HALL OPEN ............ Grand B-G
9:00 AM – 9:45 AM  PRODUCT DEMONSTRATION ........................................... Garden 3
10:00 AM – 10:25 AM  CONFERENCE OVERVIEW ........................................ Grand A

Sandra Naylor Goodwin, PhD, MSW, President and CEO, California Institute for Behavioral Health Solutions (CIBHS)
Tom Trabin, PhD, MSM, Conference Chair; Behavioral Health Informatics and Executive Consultant

10:25 AM – 11:20 AM  GENERAL SESSION KEYNOTE ....................................... Grand A

Disruptive innovations in behavioral health information technologies: What the future may bring

Dennis Morrison, PhD, Chief Clinical Officer, Netsmart, Board Member, International Initiative for Mental Health Leadership

Disruptive innovation transforms industries—such as our health care system—to provide increasingly affordable and conveniently accessible products and services to consumers and providers. For the average consumer, disruptive innovation is readily apparent—especially in areas of technology. The presenter for this session will review how smart phones, increasingly powerful computers and a flood of online tools have impacted us all. He will describe how healthcare and social services are experiencing the same changes through new methods of care delivery and support bursting on the scene that include clinical interventions becoming virtual and consumer-directed care. The presenter will emphasize the importance of anticipating and understanding these seismic changes for behavioral health organizations to thrive in the future.

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Complete instructions and system requirements for downloading and installing the CIBHS Yapp on page 17.
11:20 AM – 12:15 PM

GENERAL SESSION PANEL ..........................................
Grand A

The new generation of data analytic software: Useful reports for decision makers with the click of a mouse

Nathaniel Israel, PhD, Policy Fellow, Chapin Hall Center for Children at the University of Chicago
Timothy Hougen, PhD, Program Manager, San Bernardino County, CA
Shahrukh Chishty, MS, Program Director, Aldea Children and Family Services

Health care reform, prison reform and related initiatives bring increased accountability with their opportunities. The presenters in this session will explain how modern data analytic technologies are facilitating data analysis and reporting for managers, improving their access to actionable information, and enabling them to accelerate various types of quality improvement. The presenters will describe the use of dashboards for both managerial and clinical decision support. The presenters will describe the use of charts and graphs with click technologies to drill down into detailed analyses that are more readily conducted, displayed, understood, reported and, most important, used.

12:15 PM – 2:00 PM

LUNCH, EXHIBIT HALL OPEN ....................................
Grand B-G

2:00 PM – 3:15 PM

CONCURRENT SESSIONS ..........................................
Garden 3

How social media is helping support the recovery journeys of behavioral health consumers

Keris Jän Myrick, MBA, MS, Director, Office of Consumer Affairs, Center for Mental Health Services, SAMHSA
April C. Foreman, PhD, LP, Suicide Prevention Coordinator, Southeast Louisiana Veterans Health Care System

Behavioral health consumers have increasingly discovered the use of computer-based social media as a means to overcome social isolation and connect with others. Presenters of this session will briefly describe the pervasiveness of computers, cell phones and other mobile devices among behavioral health clients. They will overview the characteristics of key social media communities that are helping support recovery for consumers, and identify those characteristics have been found by consumers to be most engaging, meaningful and helpful. They will explain the use of such features as avatars in virtual communities and review the use of specialized apps in social communities.
2:00 PM – 3:15 PM

CONCURRENT SESSIONS, continued

Collaborative documentation in office and field settings: How to enter notes during sessions and enhance the therapeutic alliance

Kathryn Pruitt, MFTI, Clinical Program Manager, EMQ – FamiliesFirst- FIT
Jennifer Cass, LCSW, Director of Quality Assurance, EMQ - FamiliesFirst- FIT

Electronic note-taking during the treatment session is increasing in both medical and behavioral health settings. Presenters in this session will explain how this approach saves significant time and improves outcomes. They will consider widespread concern among behavioral health clinicians that concurrent documentation may have deleterious effects upon the client-therapist relationship, and present solutions. They will also include a description of note-sharing with the client as a vital component that makes the approach not only concurrent but also collaborative in a manner that engages the client.

Implementing 42CFR.2 in the evolving electronic era:
New interpretations of the regulations

Eric Goplerud, PhD, Vice President, Public Health Department, NORC at the University of Chicago
Suki Norris, JD, SATVA Organizational Member and Senior Knowledge Engineer, Echo Management Group

Amidst continuing stigma and discrimination regarding substance use disorders, privacy policies and regulations remain crucial. The 40-year-old federal 42CFR.2 regulations were designed in a pre-electronic health record era and require ongoing reinterpretations to be effectively applied amidst EHRs and HIEs. Presenters in this session will explain some of the electronic challenges of implementing 42CFR.2, and how new interpretations from the federal government are helping provider organizations to arrive at newly practical solutions. They will review some of the latest updates and reinterpretations of 42CFR.2 from SAMHSA, including how compliance can be achieved within special settings like primary care and general hospitals. The session will also feature emerging technological solutions including record segmentation, electronic disclosure forms, and ways to address the challenges of client requests to limit redisclosure.
2:00 PM – 3:15 PM  
**CONCURRENT SESSIONS, continued**

**Health Information Exchange for Care Coordination between Behavioral and Physical Health Care**  
Garden 4  
Lyman Dennis, PhD, MBA, Executive Director, Connect Healthcare  
Mark Elson PhD, Principal, Intrepid Ascent, LLC

Health Information Exchanges (HIEs) have emerged throughout the county in recent years as a result of health care reform and a range of public and private sector initiatives. Presenters for this session will explain the possible solutions that HIEs offer to the technological and regulatory obstacles to information sharing and care coordination. They will also review the obstacles they face relative to information technology, privacy and security, and sustainable business models.

3:15 PM – 3:45 PM  
**BREAK AND EXHIBIT HALL OPEN**  
Grand B-G

3:45 PM – 5:00 PM  
**GENERAL SESSION KEYNOTE**  
Grand A

**As the rest of the nation watches: The roles and challenges of information technology in supporting implementation of California's 1115 Drug Medi-Cal Waiver**

Michael Hutchinson, MFT, Division Director, Quality Improvement and Data Support, Department of Alcohol and Drug Services, Santa Clara County  
Marco Zolow, PhD, Health Program Specialist, Prevention Treatment and Recovery Services, Substance Use Disorder Services Division, California DHCS

California is embarking upon a historic transformation of its substance use disorder services through a MediCaid Waiver that the rest of the nation is avidly watching and hoping to adopt for their own solutions to long-term treatment challenges. Presenters will explain the Waiver’s intent to help design Organized Delivery Systems for substance use services, and how the Waiver’s Standard Terms and Conditions are designed to help accomplish this purpose. They will explain the crucial role of EHRs and HIE in supporting Organized Delivery Systems so they provide care that is client-centered, well-coordinated, and accountable for quality. Presenters will also address billing code and other changes necessary to implement the waiver, EHR prompts to improve QA compliance, and approaches to facilitating information sharing across substance use, mental health and physical health services. They will also explain the importance of this Waiver for other states across the country.

5:00 PM – 6:45 PM  
**EXHIBITOR RECEPTION AND EXHIBIT HALL OPEN**  
Grand B-G
THURSDAY, April 28, 2016

8:15 AM – 3:30 PM
REGISTRATION .................................................. Grand Foyer

7:45 AM – 8:45 AM
CONTINENTAL BREAKFAST AND EXHIBIT HALL OPEN Exym ............................................... Grand B-G

8:30 AM – 9:40 AM
GENERAL SESSION KEYNOTE ....................................... Grand A

Interoperability: Emerging standards and electronic interfaces to support data exchange between differing information technology systems

Donald T. Mon, PhD, Senior Director, Center for the Advancement of Health IT (CAHIT), RTI International

The healthcare system needs improved interoperability of technology, workflows, forms and vocabulary to support the information sharing essential to care coordination. This is the focus of national IT efforts, especially now that EHRs have become more widely implemented. This session will feature a long-time national policy leader in health information technology, who will review the different types of interoperability needed, the latest updates in interoperability standards and future directions in new standards. He will review the types of technology interfaces most widely used and new ones under development to bridge differences between different EHRs and related IT systems. He will overview common record structures and vocabularies, standardized modes of electronic transmission, and emerging standards for segmenting EHRs.

9:45 AM – 10:45 AM
GENERAL SESSION KEYNOTE ....................................... Grand A

Data privacy, security and consent: Evolving policies and regulatory changes

Lucia Savage, JD, Chief Privacy Officer, Office of the National Coordinator for Health IT

The health care system is generating significant increases in electronic health information exchange and a proliferation of new technology applications that are provoking widespread concern about new types of privacy and security challenges. This session will feature a high level federal official who leads nationwide policy development on the privacy and security of health care data. She will articulate some of the most salient challenges for the privacy and security of healthcare data, and particular challenges in these areas for behavioral healthcare. She will also describe national regulatory and policy initiatives to address these challenges, and provide insights and guidance for how behavioral health organizations can position their privacy and security approaches for the future.
THURSDAY, April 28, 2016

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BREAK AND EXHIBIT HALL OPEN ................................................. Grand B-G

11:15 AM – 12:30 PM  
CONCURRENT SESSIONS

Engaging people in the use of client portals as an adjunct to their EHRs: Varied functions and user experience .................. Garden 3
Thad Dickson, PMP, CPHIMS, President, Xpio Health

People are increasingly using client portals connected to their EHR for improving their access to information on illness prevention and treatment, increased engagement in their treatment plans, and easier access to their treating providers for brief communications. Presenter for this session will review such functions as scheduling, queries with their treatment providers, entry of app information that involves regular self-monitoring of behavioral health data, and review of information updates in their EHRs. He will describe various approaches to engaging consumers in use of the portals including learning what content and formatting consumers find easiest to access and most engaging, and how those using the portals would like to see it improved. Presenter will also review special issues in this area, including how youth access information in their EHRs and what adult clients would like to see in portal functions.

EHR Supports for Meeting Clinical Documentation Requirements in Alcohol/Drug and Mental Health Programs ...................... Garden 4
Stan Taubman, PhD, LCSW, Program Director, Berkeley Training Associates
Tom Trabin, PhD, MSM, Alameda County Alcohol and Drug Program Administrator and Former Chair, County Treatment Plan Coalition

Behavioral health clinicians are challenged to write treatment plans that meet MediCaid requirements and also reflect the client-friendly language of hope and recovery. Substance use counselors will be particularly challenged by this in the very near future as expanded Drug Medicaid coverage will bring increased rigor to documentation requirements. Presenters will explain the complexities of these challenges and both substance use and mental health counselors’ needs for training and support to meet the challenges effectively. Presenters will provide examples of ways that the structure of the treatment plan and extensive sample phrases embedded in the EHR can help substance use and mental health counselors address these needs. They will also describe a 3-year statewide process involving a coalition of 26 counties and hundreds of stakeholders to develop an extensive library of treatment plan phrases—efficiently searchable when computerized—to meet the needs of public sector documentation for mental health, substance use and physical health treatment services.
CONCURRENT SESSIONS, continued

The Certified Community Behavioral Health Clinics initiative: New hope for the future of behavioral health services and its implications for information technology

Ben Butler, Chief Information Officer, Community Oriented Correctional Health Services
Steve Rosenberg, President, Community Oriented Correctional Health Services

The federal Excellence in Mental Health Act is designed to increase Americans’ access to community mental health and substance use treatment services while improving Medicaid reimbursement for these services. When fully implemented, the Excellence Act will infuse over $1 billion into the behavioral health system, making it the biggest federal investment in mental health and addiction services in generations, but it will require new payment models and offer performance bonuses that require new outcomes documentation. Presenters for this session will summarize components of this Act, including criteria for the Certified Community Behavioral Health Clinics (CBHCs) that form its core component, the enhanced federal match for service costs, the prospective payment system, and anticipated areas for potential savings to the overall health care system. They will preview the types of EHR and related information technology functions necessary to support the CBHC requirements and help the session participants anticipate and prepare for the challenges and opportunities of this groundbreaking new initiative.

EHR supports to meet Medi-Caid and recovery requirements for substance use and mental health treatment planning

Mark Cheng, Acting Chief, Solutions Delivery Division, LA County DMH Chief Information Office Bureau
Juan Fermin, Integration Manager, Solutions Delivery Division, LA County DMH Chief Information Office Bureau
Chris Howard, IT Manager, Foothill Family

Most behavioral health treatment providers receive payments from more than one payer, with accompanying and often conflicting requirements for modes of data entry and information exchange. Presenters will describe various approaches to electronic information exchange between a large county and their contracted providers, including examples of requiring use of a common EHR system and building interfaces between differing EHRs. They will describe how these approaches are used in communicating claim information via HIPAA transactions, transmitting utilization and outcomes data, and conducting chart audits and related quality assurance activities. The presenters will explain how subsidized adoption of an EHR from a major payer can be a mixed blessing for providers who must pay for reconfiguring the EHR System to also meet the requirements of multiple other payers. They will also describe how some providers are coping successfully with these opportunities and challenges. Presenters will explain the relevance of these arrangements and lessons learned for providers and payers in other settings where similar opportunities and challenges are being addressed.
THURSDAY, April 28, 2016

12:30 PM – 2:00 PM
LUNCH AND EXHIBIT HALL OPEN .............................................. Grand B-G

2:00 PM – 3:15 PM
CONCURRENT SESSIONS

A review of innovative apps to enhance behavioral health treatment and wellness: Guiding principles for effective functions and uses ........................................... Garden 1&2

April C. Foreman, PhD, LP, Suicide Prevention Coordinator, Southeast Louisiana Veterans Health Care System
Tony Wood, Owner, Midwest Computer Solutions

App developers are producing many ingenuously useful products for general healthcare and wellness, and specifically for behavioral healthcare. Presenters will overview the types of functions available, which can be used from both personal computers and mobile devices. They will explain which types of apps are being used as adjuncts to treatment, and which are used for wellness, independent of treatment. They will also review many of the apps in wide use and what has been learned from research and experience about the most and least effective approaches to engaging clients and producing compelling results.

Improving treatment outcomes for clients with substance use conditions: Information management tools to support a person-centered approach ........................................... Pacific N

Julie Seitz, LADC, LSW, Clinical Director, Center for Alcohol and Drug Treatment

At the heart of American Society of Addiction Medicine (ASAM) criteria is person-centered care—regularly adjusting the treatment to match the changing needs and situation of the client. The presenter for this session will first review how the initial assessment can be used to determine the most appropriate level of care and type of treatment within a diverse continuum of care. She will then describe how brief screening instruments can be used on an ongoing basis throughout treatment to monitor the quality of the therapeutic alliance and the client’s progress in treatment, and then customize the client’s treatment accordingly. She will explain how information technology tools can provide vital supports for these efforts, streamlining data entry and providing rapid feedback through data-driven reports that help improve client outcomes.

Telehealth interventions for behavioral healthcare: Diverse uses, privacy and security considerations, and practical strategies for implementation ........................................... Garden 4

Marlene Maheu, PhD, Executive Director, TeleMental Health Institute, Inc.

Telehealth has been used for many years in a regulatory environment that provides guidelines for the interventions and their reimbursement. In this session presenter will define and describe types of telehealth interventions including online counseling, audio-video assessment and counseling, telephonic counseling, and audio-video psychiatric consultations. She will review legal and regulatory issues, including those posed by HIPAA and 42CFR.2, and how to address them. She will also review best practices by type of intervention and client situation, and how telehealth can provide access to care that would not otherwise be feasible.
2:00 PM – 3:15 PM

CONCURRENT SESSIONS, continued

Information sharing to facilitate service coordination across behavioral health and child welfare: Showcase examples with useful approaches and lessons learned. ................................ Garden 3

Richard Epstein, PhD, Research Fellow, Chapin Hall Center for Children at the University of Chicago
Linette Scott, MD, MPH, Chief Medical Information Officer and Deputy Director of the Information Management Division, California Department of Health Care Services

Across the country new models are emerging for increased service coordination between child welfare and behavioral health services. Presenter at this session will review the barriers to information sharing across these systems with a focus on privacy and consent requirements and on discrepant IT systems. He will describe successful statewide approaches to universal data sharing and lessons that counties can use for foster youth and other youth populations. He will also review the impact that these approaches can have on improved care for youth and their families.

3:30 PM – 4:30 PM

CLOSING KEYNOTE

As primary and behavioral healthcare work more closely together to serve their clients: The roles of information technology to support client centered care ................................ Grand A

Linette Scott, MD, MPH, Chief Medical Information Officer and Deputy Director of the Information Management Division, California Department of Health Care Services

Health care reform is driving increased collaboration between primary care and behavioral health care. Presenters for this session will review the reasons for these changes, the incentives in place, and the anticipated future directions. She will describe the types of increased collaboration including referrals and information exchanges between primary and specialty behavioral health care. She will also describe what integrated behavioral health care within primary care settings and integrated primary care within behavioral health settings are like. She will review special challenges for record structuring and information sharing when behavioral health is integrated into primary care settings, when primary care is integrated into behavioral health settings, and when information is shared between separated primary care and specialty behavioral health settings. She will review technology standards developments enabling record segmentation for selective client consents to release information.

4:30 PM

CONFERENCE ADJOURNS
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The Echo Group
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The Echo Group ensures customers are clinically effective and financially strong by providing industry leading EHR, billing software, managed care and Revenue Cycle Management solutions. Whether you choose a cloud-based implementation or a self-hosted approach, Echo brings you the most intuitive and flexible products available for behavioral health including the innovative Visual Health Record.

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Askesis is the preferred technology partner for maximizing organizational performance, improving clinical operation efficiency, optimizing revenue cycle management, facilitating care coordination, and promoting consumer engagement for health and human service organizations. Learn more about Askesis and its flagship electronic health record software application, PsychConsult® Provider.

California Consortium of Addicted Programs and Professionals
www.ccapp.us
Booth # 402

“CCAPP is the largest statewide consortium of addiction focused professionals, treatment agencies and recovery residences, providing membership, education and credentialing services to over 100,000 California residents annually. Our mission is to promote excellence in the delivery of services by providing the highest level of advocacy, competence, and ethics among programs and professionals.”
Clinivate
www.clinivate.com
Booth # 406
Clinitrak is “The Affordable EHR Solution for Behavioral Health Agencies.” Clinitrak® was specifically developed to address the needs of behavioral health agencies, providers, clinicians and managers. A totally web-based application, Clinitrak customers do not have to be concerned about purchasing hardware or about receiving and installing updates and enhancements. Clinitrak customers incur no start-up fees, free software updates and Clinivate is proud to still offer free live technical support to all of our customers.

Core Solutions, Inc.
www.coresolutionsinc.com
Booth # 103
Core Solutions is the progressive leader in transforming the health and human services experience for behavioral health providers, consumers and state agencies. Core’s integrated EHR software, Cx360, offers advanced population health and information management to achieve improved outcomes and relationships between providers, consumers and payers.

Credible Behavioral Health
www.credibleinc.com
Booth # 108 & 106
Credible is committed to improving the quality of care and lives in behavioral health for clients, families, providers, and management. A market leader in Behavioral Health Enterprise Software, Credible has partnered with over 290 Partner Agencies in 24 states and the District of Columbia. We provide secure, proven, easy to use software for clinic, community, residential, and mobile care providers.

eCenter Research, Inc.
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eCenter Research is a leader in the field of behavioral health information management and population health monitoring. Their products, such as eBHS, offer a secure clinical information and population health monitoring system with connectivity to existing EHRs. eBHS supports collaborative, multi-agency care processes that enable providers to improve outcomes for clients, groups of clients, and whole systems of care through real-time capture of and access to behavioral and physical health information. For more information about eBHS and how it can support your needs please submit an Interest form which can be located here http://www.cibhs.org/electronic-behavioral-health-solutions-ebhs or contact Shoshana Zatz at: eBHS@cibhs.org. For information about eCenter Research eINSIGHT Systems: info@ecenterresearch.com

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Inflexxion offers evidence-based programs, including the ASI-MV, which improve efficiency and performance of clinical teams within behavioral health and addiction treatment organizations. These online interactive programs streamline data collection and provide real time reporting, resulting in reduced health-related risks, enhanced clinical outcomes, and improved quality of care.

Kings View
www.kingsview.org
Kings View has addressed the unique behavioral and social needs of the seriously mentally ill for the past 65 years and is recognized as the industry leader for innovation and collaboration. Kings View offers six service lines: Mental Health, TelePsychiatry, Substance Abuse, Intellectually Challenged Programs, Youth Empowerment, and Information Systems.

Netsmart
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SageSurfer
www.sagesurfer.com
Collaborative Care Connection is a web-based platform that allows clients, family members and other significant persons participate in the care treatment planning process. Our platform and accompanying mobile apps offer clients and their care managers a powerful tool to organize care team communications, contribute ideas and actions that will facilitate care coordination, and enable clients to easily connect with additional resources and community-based service providers.

Valant
http://valant.com
Valant was founded in 2005 to provide behavioral health practices, agencies and clinicians with cloud-based software to streamline administration and empower what's most important: improving outcomes. Inspired by the fact that technology has transformed all of our lives in meaningful ways, Valant has reinvented the behavioral health platform.

Welligent
www.welligent.com
Welligent is a cloud-based EHR that is mobile and secure. Our system provides documentation, scheduling and caseload management access from your desktop, tablet or smartphone. Welligent provides the software tools needed to manage all programs, services and payers from one, integrated system. Clinical records, treatment plan libraries, forms management, ePrescribing, electronic billing and reporting are all available with Welligent.
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If you are downloading from a computer via the CIBHS website: http://www.cibhs.org/cibhs-apps

If your invitees visit the link on a computer, we’ve still got you covered. They can first view a preview of what the app has in store. Then, they can either type in a phone number and the app invite will be sent directly to that phone, or they can scan the app’s QR code with their smartphone. (If they report trouble with the link on a computer, make sure there isn’t a “www.” in front of the “my.yapp.us” portion of the link.)

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EMQ Families First

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