

The 15th Annual National Behavioral Health Information Management Conference and Exposition

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

Conference Program

April 15–16, 2015

Hyatt Regency Long Beach
200 South Pine Avenue
Long Beach, CA 90802



CIBHS
CALIFORNIA INSTITUTE FOR
BEHAVIORAL HEALTH SOLUTIONS

LEADERS IN
POLICY,
TRAINING,
EVALUATION
AND RESEARCH

PROGRAM AT-A-GLANCE

WEDNESDAY, April 15, 2015

7:30 AM – 5:15 PM	REGISTRATION				
7:30 AM – 10:00 AM	CONTINENTAL BREAKFAST AND EXHIBIT HALL OPEN				
8:00 AM – 8:45 AM	PRODUCT DEMONSTRATION				
9:00 AM – 9:45 AM	PRODUCT DEMONSTRATION				
10:00 AM – 10:25 AM	CONFERENCE OVERVIEW				
10:25 AM – 11:20 AM	GENERAL SESSION KEYNOTE The gradual evolution of standards essential to support interoperability, data sharing and electronic health information exchange (HIE)				
11:20 AM – 12:15 PM	GENERAL SESSION KEYNOTE Supporting HIE between primary care and specialty behavioral health providers: Common forms, client consents, and other inter-organizational arrangements				
12:15 PM – 2:00 PM	LUNCH, EXHIBIT HALL OPEN				
1:00 PM – 1:45 PM	PRODUCT DEMONSTRATION				
2:00 PM – 3:15 PM	CONCURRENT SESSIONS				
	<table> <tr> <td>Facilitating client information exchange between behavioral health and criminal justice systems</td><td>Technology interface challenges between hospitals and other treatment settings in support of care coordination</td></tr> <tr> <td>Transitioning to ICD-10 and DSM-5: How treatment organizations, EHR vendors, health plans, and others have mobilized to address the challenges</td><td>Advanced stages of EHR implementation: Linking functions to streamline workflow and providing clinical decision support for quality improvement</td></tr> </table>	Facilitating client information exchange between behavioral health and criminal justice systems	Technology interface challenges between hospitals and other treatment settings in support of care coordination	Transitioning to ICD-10 and DSM-5: How treatment organizations, EHR vendors, health plans, and others have mobilized to address the challenges	Advanced stages of EHR implementation: Linking functions to streamline workflow and providing clinical decision support for quality improvement
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3:15 PM – 3:45 PM	BREAK AND EXHIBIT HALL OPEN				
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5:00 PM – 6:45 PM	EXHIBITOR RECEPTION AND EXHIBIT HALL OPEN				

THURSDAY, April 16, 2015

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3:30 PM	CLOSING GENERAL SESSION Reducing the tower of Babel: The benefits and feasibility of standardizing a few performance and outcome measures				
4:30 PM	CONFERENCE ADJOURNS				



The National Behavioral Health Information Management Conference and Exposition

WEDNESDAY, April 15, 2015

7:30 AM – 5:15 PM	REGISTRATION REGENCY FOYER
7:30 AM – 10:00 AM	CONTINENTAL BREAKFAST AND EXHIBIT HALL OPEN . . . REGENCY BALLROOM
8:00 AM – 8:45 AM	PRODUCT DEMONSTRATION  SEAVIEW AB
9:00 AM – 9:45 AM	PRODUCT DEMONSTRATION  SEAVIEW AB
10:00 AM – 10:25 AM	CONFERENCE OVERVIEW BEACON BALLROOM 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 BEACON BALLROOM The gradual evolution of standards essential to support interoperability, data sharing and electronic health information exchange (HIE) Pamela Lane, MS, RHIA, CPHIMS , Deputy Secretary, California Health and Human Services Agency (CHHS) and Director, California Office of Health Information Integrity As widespread implementation of EHRs continue, the emphasis of pioneering work on health information technology standards is shifting to HIE. The presenter for this session will review some of the most essential standards for HIE, with a particular focus on content and form structure, vocabulary, and both transport and security protocols. Among the standards she will review are CCR, CCD, C-CDA structure and content for transitions of care. She will also explain the importance of data provenance standards to support data segmentation and prevent unconsented re-disclosures.
11:20 AM – 12:15 PM	GENERAL SESSION KEYNOTE BEACON BALLROOM Supporting HIE between primary care and specialty behavioral health providers: Common forms, client consents, and other inter-organizational arrangements Virna Little PsyD, LCSW, SAP, CCM , Vice President for Psychosocial Services / Community Affairs, The Institute for Family Health As the Affordable Health Care Act prompts a strengthening of interconnections between primary care and behavioral health providers, they are increasing their exchange of client information. The presenter for this session will describe different types of health information exchanges by these providers to support care coordination. She will discuss various arrangements made between providers for streamlining these exchanges such as commonly structured electronic forms for communicating client data and client consent. The presenter will also explain some of the differences between medical and behavioral health EHRs that present challenges for interoperability and describe some of the electronic interfaces developed to support information exchange between them.

DAY 1

WEDNESDAY, April 15, 2015

12:15 PM – 2:00 PM

LUNCH, EXHIBIT HALL OPEN REGENCY BALLROOM

1:00 PM – 1:45 PM

PRODUCT DEMONSTRATION  **Microsoft**  **CoCENTRIX** **SEAVIEW AB**

2:00 PM – 3:15 PM

CONCURRENT SESSIONS

**Facilitating client information exchange between
behavioral health and criminal justice systems BEACON BALLROOM**

David Litvack, Criminal Justice Advisory Council Coordinator, Salt Lake County Mayor's Office,
Office of Regional Development

Mack Jenkins, Chief Probation Officer, San Diego County Probation

Goeff Twitchell, PhD, Director of Treatment and Clinical Services, San Diego County Probation
Department

Prison reform is returning thousands of offenders to counties now faced with responsibilities for addressing their mental health and substance use problems. This is prompting a positive effort to enhance and coordinate re-entry services among multiple local service systems including criminal justice, physical and behavioral health care, employment and housing. Exchange of information between these systems is vital, but diverse databases and privacy and security guidelines make for challenges. This session will highlight these challenges and provide examples of how some counties and states developed innovative solutions.

**Technology interface challenges between hospitals
and other treatment settings in support of care coordination SEAVIEW AB**

Dr. Steven Ronik, Chief Executive Officer, Henderson Behavioral Health

Michael Fitzgerald, MSN, Executive Director, Behavioral Health Services, El Camino Hospital

Among the highest risk challenges for systems of care are facilitating effective discharge transitions from acute care to outpatient treatment. For this reason, one of the few system-wide behavioral health measures with the most widespread national use is the time between discharge and first outpatient appointment. Presenters for this important session will review the types of data collection and analyses that must be conducted by the system of care to track this measure across treatment settings. They will evaluate the challenges to hospitals and outpatient settings in sharing information electronically for timely communication in service of their clients. The presenters will review steps being taken by hospitals and outpatient settings along with major payers and system of care managers to assure that the necessary consents, technological interfaces, and workflows are in place to streamline the information exchange needed to coordinate care.

WEDNESDAY, April 15, 2015

2:00 PM – 3:15 PM

CONCURRENT SESSIONS, continued

Transitioning to ICD-10 and DSM-5:

**How treatment organizations, EHR vendors, health plans,
and others have mobilized to address the challenges**

SEAVIEW C

Lisette Wright, Executive Director, Behavioral Health Solutions

All clinical diagnosing, charting and claiming is migrating from ICD-9 to ICD-10 and from DSM-4 to DSM-5. The presenter for this session will describe the nature of the changes in philosophy, content and coding. She will explain the magnitude of change for EHR software that vendors must reconfigure. She will also describe many of the changes for clinicians in how to diagnose and code, and for claiming and billing specialists in how to submit proper codes. The presenter will also advise on training procedures and on changes to quality assurance policies so that the training is implemented effectively.

Advanced stages of EHR implementation:

**Linking functions to streamline workflow and providing
clinical decision support for quality improvement.**

SHORELINE AB

Virna Little PsyD, LCSW, SAP, CCM, Vice President for Psychosocial Services / Community Affairs, The Institute for Family Health

David R. Gastfriend, MD, CEO, Treatment Research Institute and Chief Architect, The ASAM Criteria Software

Once an organization has implemented the basic functionality of their EHR, possibilities emerge for more advanced functions. Presenters will describe how interconnections between scheduling, clinical, quality assurance and billing functions can streamline and improve workflows. They will explain technological supports for managing record privacy, including record segmentation and varied types of password access. The presenters will review various examples of clinical decision support prompts, including how the “golden thread” can be strengthened between assessments, treatment plans with guidelines for evidence-based practices, and progress notes. The presenters will evaluate what some organizations developed as best approaches to installing decision support prompts, and lessons learned from approaches that proved to be ineffective.

3:15 PM – 3:45 PM

BREAK AND EXHIBIT HALL OPEN REGENCY BALLROOM

DAY 1



The National Behavioral Health Information Management Conference and Exposition

WEDNESDAY, April 15, 2015

3:45 PM – 5:00 PM

GENERAL SESSION KEYNOTE BEACON BALLROOM

**Changes coming soon from California DHCS billing and reporting systems:
What counties and providers need to know**

Ben Word, Chief Architect, DHCS

Don Kingdon, PhD, Director of Mental Health Policy, Harbage Consulting

The Department of Health Care Services (DHCS) recently incorporated the separate state departments of Mental Health and of Alcohol and Drug Programs. This new integration creates opportunities for upgrading and integrating older IT systems for billing and other functions that guide and powerfully impact how counties and providers collect, organize, and report data to the state. Presenters will describe emerging DHCS' plans for upgrading billing regulations and IT systems for MH and SUD treatment, including adjustments to Short-Doyle billing systems. They will highlight a special focus on MediCaid Information Technology Architecture (MITA) from both policy and technology perspectives that will create new standards for California counties and providers.

5:00 PM – 6:45 PM

EXHIBITOR RECEPTION AND EXHIBIT HALL OPEN REGENCY BALLROOM

DAY 1



The National Behavioral Health Information Management Conference and Exposition

THURSDAY, April 16, 2015

7:30 AM – 3:30 PM

REGISTRATION REGENCY FOYER

7:30 AM – 8:15 AM

**CONTINENTAL BREAKFAST AND
EXHIBIT HALL OPEN**



. REGENCY BALLROOM

8:30 AM – 9:45 AM

GENERAL SESSION KEYNOTE BEACON BALLROOM

One year later: A review of the dramatic changes from the Affordable Care Act (ACA) and their impact on information technology for behavioral healthcare services

Rear Admiral Peter J. Delany, PhD, LCSW-C, Director, Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration; Rear Admiral, US Public Health Service

The ACA brought massive changes to the healthcare system, impacting millions of persons previously without health coverage and the organizations that serve them. The presenter will explain how the shift to Medicaid payment mechanisms increases the necessity for health information technology to more efficiently meet new documentation and claiming requirements. He will also review the increased emphasis on closer care coordination between providers, public agencies, and health plans that necessitates use of electronic health record systems and electronic health information exchange. He will forecast future trends from ACA including pay for performance that necessitates electronic information systems to support data entry and analysis.

9:45 AM – 10:45 AM

GENERAL SESSION KEYNOTE BEACON BALLROOM

The implications of future changes to reimbursement models: How will it impact what we need from IT systems?

Dale Jarvis, MBA, Principal, Dale Jarvis and Associates, LLC

Counties and provider organizations will need to manage care effectively in new ways as reimbursement models change from fee for service to case rate and capitation. The presenter for this session will envision these future changes, define the financial arrangements, and explain the rationale for their likely emergence. He will explain the changing information needs that executives will have to manage in this new environment, including a better understanding of client mix, assessing risk factors for high utilization, and data analytic tools. The presenter will explain the differences between encounter data and service data, and he will define the types of data most likely to be essential for managing in the anticipated future environment of new fiscal arrangements.

10:45 AM – 11:15 AM

BREAK AND EXHIBIT HALL OPEN REGENCY BALLROOM

DAY 2

THURSDAY, April 16, 2015

11:15 AM – 12:30 PM

CONCURRENT SESSIONS

**Challenges and benefits of interagency data exchange
with children's behavioral health services,
child welfare and education BEACON BALLROOM**

Patrick Gardner, JD, President, Young Minds Advocacy Project

Lynn Thull, PhD, Children's Mental Health Policy and Practice Improvement, Alliance for
Children and Family Services

Betty Walton, MSW, PhD, Research Professor, Indiana University School of Social Work &
Indiana Family & Social Services Administration, Division of Mental Health & Addiction

Behavioral health services for youths and their families often require coordination with multiple agencies and systems of care including child welfare, education, juvenile justice, and foster care. Presenters will discuss how youth and family services necessitate exchange of information between disparate electronic information systems for effective care coordination and reporting. They will describe how Katie A and other regulatory initiatives further underscore the need for interconnecting information systems that support systems of care for youths and families.

**The future of 42 CFR.2 regulations for protecting the privacy
of substance use-related client data: What new interpretations
for the electronic era may be coming? SEAVIEW AB**

Rear Admiral Peter J. Delany, PhD, LCSW-C, Director, Center for Behavioral Health Statistics
and Quality, Substance Abuse and Mental Health Services Administration; Rear Admiral,
US Public Health Service

Renee Popovits, JD, Attorney, Popovits & Robinson, Attorneys at Law

In response to demand from many stakeholders, the Substance Abuse and Mental Health Services Administration is taking a further, in-depth review of the applicability of 42CFR.2 regulations in the evolving electronic environment. Presenters for this session will summarize the controversies engendered by the increased use of electronic health information exchange, particularly the difficult balance needed between encouraging HIE in support of care coordination between providers and protecting privacy when client consent is not forthcoming. They will describe how the emergence of HIE organizations and the closer coordination of behavioral health services with primary care have complicated these challenges. They will review the changes in interpretation of the regulation that SAMHSA has already made during the past few years, and new ones being considered.

THURSDAY, April 16, 2015

11:15 AM – 12:30 PM

CONCURRENT SESSIONS, continued

How managers can use technological advances to streamline electronic data entry, analysis and meaningful reports to support quality management efforts SEAVIEW C

Dr. Steven Ronik, Chief Executive Officer, Henderson Behavioral Health

Amie Miller, MFT, Quality Improvement Manager, Monterey County Behavioral Health Division

Health care reform, prison reform and other transformational policy changes are placing increased emphasis on data-driven performance and outcomes. In this session presenters will review how the widespread use of EHRs in diverse settings is making it easier to enter original data electronically, thus obviating the need for translation from paper to computers. They will review new advances in technology that make it easier to analyze data and provide the results as meaningful information in visual formats that are easy to understand, use and further analyze. The presenters will evaluate the extent to which EHRs have built in these capabilities, and when it is useful to deploy separate data analytic software as an adjunct. They will explain how analytic software can make it easier for managers to perform data analyses directly, and when it is most opportune to rely upon staff data analysts to assist in the processes of data analysis and report interpretation.

EHRs for integrated behavioral health in primary care settings: special features to support care coordination within the team SHORELINE AB

Olga Felton, RN, MSN, Nursing Director, Didi Hirsch Mental Health Services

Michael R. Lardieri, LCSW, AVP, Strategic Program Development, Behavioral Health Service Line, North Shore LIJ Health System

Increasingly behavioral health services are being integrated into primary care as an integral part of the team. In this session presenters will review organizational models that integrate primary medical care with mental health and substance use disorder treatment; discuss health information technologies that support integration; and explain the factors that facilitate and complicate the use of HIT to support integrated care. Presenters will also discuss the tradeoffs of record segmentation and provide examples of primary care settings that maintain a separate behavioral health record from the physical health record, and those that maintain a unified patient record.

12:30 PM – 2:00 PM

LUNCH AND EXHIBIT HALL OPEN REGENCY BALLROOM

1:00 PM – 1:45 PM

PRODUCT DEMONSTRATION  **Netsmart SEAVIEW AB**

1:45 PM – 2:00 PM

BREAK

DAY 2

THURSDAY, April 16, 2015

2:00 PM – 3:15 PM

CONCURRENT SESSIONS

The restructuring of public sector systems of care:

Data sharing agreements between specialty

behavioral health plans and physical health plans BEACON BALLROOM

Clayton Chau, MD, PhD, Medical Director, Behavioral Health Department, L.A. Care Health Plan

Renee Popovits, JD, Attorney, Popovits & Robinson, Attorneys at Law

Health care reform is catalyzing a dramatic restructuring of public health care delivery systems. Presenters will explain how the restructuring has led to closer care coordination between county behavioral health and other public agencies and health plans. They will explain the consequent increase in data sharing between behavioral health and these other organizations, and the benefits and challenges that it presents. They will review the burgeoning types of data sharing agreements intended to define and facilitate the increased coordination of services, with examples from several counties. In particular, they will describe the enhanced case management across agencies that has emerged as a result of these agreements.

Advances in technologies for HIE: A dynamic evolution of

functionality for EHRs and HIE organizations. SHORELINE AB

Paul Budilo, Executive Director, Orange County Partnership Regional Health Information Organization (OCPRHIO)

Andy McCraw, MPH, President, Software and Technology Vendors Association (SATVA)
President, Welligent, Inc.

The increased focus on electronic exchange of health information requires advances in HIE technologies and their rapid implementation. Presenters for this session will include representatives of leading behavioral health and medical EHR vendors, along with a leading expert in technology innovations to support HIE. They will describe methods for data sharing already in use such as Direct, FTPs, digital signature tools, and others. They will overview the current status of HIE mechanisms in EHRs, including technological-facilitated privacy and security protections, and the extent to which electronic HIE through the EHR is commonly used. Presenters will describe the range of mobile technologies useful to staff in the field for varying functions and how those technologies receive and transmit information helpful to staff working with clients. They will then envision the future of HIE-related technologies, the development work being done to get there, and some examples of innovative implementations already underway.

THURSDAY, April 16, 2015

2:00 PM – 3:15 PM

CONCURRENT SESSIONS, continued

Meaningful Use: Incentives, standards, and aspirational goals SEAVIEW C

Michael R. Lardieri, LCSW, AVP, Strategic Program Development, Behavioral Health Service Line, North Shore LIJ Health System

The Meaningful Use initiative is focusing EHR implementation efforts on providing meaningful information, even for those who aren't eligible for the financial incentives. The presenter in this session will review the Meaningful Use standards and their associated incentives, especially for stages 2 and 3. He will discuss the relevance and implications of these standards for behavioral health organizations, and provide examples of how some organizations are implementing stages 2 and 3. He will include organizational implementation examples of how meaningful client outcomes and quality improvements were achieved.

Patient portals, personal health records (PHRs), smart phone apps and other mobile devices to promote engagement in care and enhance wellness and recovery. SEAVIEW AB

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

Stacey Sterling, MSW, MPH, Practice Leader, Kaiser Permanente Division of Research

A range of innovative technologies are now available to promote the engagement of clients and their family in the treatment process and their recovery journeys. Presenters will describe how patient portals through organized care systems enable client access to their own electronic health record information, to general health information and advice, and to scheduling and email communication with their health care providers. They will describe mobile apps for self-monitoring of moods, self-monitoring of physical health indicators (e.g. fit bits, basis watches), and reminder prompts related to individual care plans (e.g. GPS indicators for drug use risk areas and countering self-coping strategies). This session will also envision the dynamic future of these technologies through such new developments as the Internet of Things and Qualities of Self.

DAY 2

THURSDAY, April 16, 2015

3:30 PM

CLOSING GENERAL SESSION

**Reducing the tower of Babel: The benefits and feasibility of
standardizing a few performance and outcome measures BEACON BALLROOM**

Ron Manderscheid, PhD, Executive Director, National Association of County Behavioral Health and Developmental Disability Directors; Adjunct Professor, Bloomberg School of Public Health, Johns Hopkins University

Lynda Zeller, MPH, Senior Deputy Director, Behavioral Health & Developmental Disability Division, State of Michigan

The increasing amount and diversity of required performance and outcome measures threatens to overwhelm the capacity of behavioral health providers to respond. Presenters in this session will overview the dilemma nationally, particularly as it pertains to providers contracted to multiple payers across multiple counties. They will describe initiatives in a few states and in other countries to consolidate these requirements into a single set that can be incorporated into all EHR software systems. They will describe how this approach can streamline data collection and reduce administrative costs for providers, and preserve resources for quality improvement efforts. They will also illustrate how this approach can lead to enhanced benchmarking and quality improvement efforts.

4:30 PM

CONFERENCE ADJOURNS

THANK YOU TO OUR EXHIBITING SPONSORS



CoCentrix/Microsoft
www.cocentrix.com

Booth #216

CoCENTRIX develops products and solutions that help state governments, local governments, agencies and care providers, connect, collaborate and coordinate. We deliver the most comprehensive Electronic Health Record and care coordination solutions for Health and Human Services. Organizations in 40 states utilize our products to improve outcomes, enhance efficiencies, provide transparency and maximize revenue.



Exym, Inc.
www.exym.com

Booth #117

With over 50 customers in California, Exym is a proven, reliable and easy to use web-based EHR. Our extensive background in electronic transactions means you have an experienced partner to help you navigate the new technical requirements for healthcare. Best of all, your clinicians will love it!



Netsmart
www.ntst.com

Booth #110/112

Netsmart supports behavioral health providers to navigate the ever-changing healthcare landscape and continuously transform care. Through our electronic health records and related solutions, we positively impact the clinical, financial and operational performances of each of our clients, increasing efficiency and improving client outcomes. For information, visit www.ntst.com, call 1-800-472-5509.



The Echo Group
www.echoman.com

Booth #119/121

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.



Welligent
www.welligent.com

Booth #111/210

Find out why more providers are saying "We Chose Welligent!" Welligent EHR has outstanding support and responsiveness, quarterly product enhancements, on-going change management for all billing and regulatory requirements at no additional cost, and more. Call or click today to find out how your agency can experience the Welligent difference!

THANK YOU TO OUR OTHER EXHIBITORS



Askesis Development Group

www.askesis.com

Booth #122

Askesis Development Group provides state-of-the-art software solutions for service delivery and business management excellence in health and human service organizations. A leader in strategy and innovation, Askesis is the preferred technology partner for maximizing organizational performance, improving clinical operations, optimizing revenue cycle management, facilitating care coordination, and promoting consumer engagement.



BestNotes

www.bestnotes.com

Booth #222

BestNotes is a HIPAA compliant Customer Relationship Management and Electronic Health Record database system specifically designed for the behavioral health industry. Users of BestNotes enjoy no upfront fees, unlimited training and support, month-to-month contract, and unlimited data for one low monthly price. Give us a call for a free trial today!"



Care Management Technologies, Inc.

www.cmthealthcare.com

Booth #208

Care Management Technologies (CMT) is a firm with expertise and experience in behavioral health (MH/DD/SA) data analytic solutions. CMT's expertise is in enabling payers and providers to improve the health of populations through risk identification and stratification across a myriad of complexities resulting in efficient and proactive outreach and care.



ClaimTrak Systems, Inc.

www.claimtrak.com

Booth #107

CLAIMTRAK is a complete Electronic Health Record (EHR)—Clinical, Billing, Scheduling, Reporting, Medication Management, etc.—for inpatient, outpatient and residential providers. In addition, CLAIMTRAK also offers an integrated Primary Care Module. While ClaimTrak customers utilize much functionality “straight from the box”, CLAIMTRAK has been designed to be extremely flexible to effectively meet the specific needs of each program and organization. In short, CLAIMTRAK allows providers to manage critical information, reduce operational costs, increase reimbursements and improve quality of care.



Clinivate

www.clinivate.com

Booth #204

Clinitak® “The Affordable EHR Solution for Behavioral Health Agencies” was specifically developed to address the needs of behavioral health agencies, providers, clinicians and managers. Featuring customizable reporting, Evidence Based Practices (EBP) support with graphical outcome tracking, treatment plans, electronic prescribing and much, much more. As a totally web-based application Clinitak customers incur no start-up fees, free software updates and Clinivate is proud to still offer free live technical support.



eCenter Research, Inc.

http://ecenterresearch.com/ecenter_test/

Booth #200

eBHS is a secure online clinical information system powered by eCenter Research with connectivity to existing EMR's. 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. Contact Rikke Addis raddis@cibhs.org for more information about CIBHS Advanced Recovery, Coordinated Care, Small County Data Center, MOQA, CPS, and Evaluation projects. For information about eCenter Research eINSIGHT Systems info@ecenterresearch.com



FEI Systems
www.feisystems.com

Booth #220

FEI Systems is a leading provider of health-related IT solutions, directly supporting 30 State and County clients implementing the WITS behavioral health focused EHR system, as well as CMS, SAMHSA and ONC. FEI is excited to showcase WITS as a solution for implementing California's 1115 Waiver, and California Mental Health Services Act Prevention and Early Intervention reporting requirements.



Foothold Technology
<http://footholdtechnology.com>

Booth #109

Foothold Technology offers a certified electronic record, AWARDS, that helps human service providers manage services, track client data, and generate reports for better outcomes and billing. Originating from three agencies in 2000, AWARDS is ideal for virtually all service types and is fully interoperable with any other federally certified system.



Genoa, a QoL Healthcare Company
www.genoa-qol.com

Booth #218

Genoa, a QoL Healthcare Company is the nation's market-leading provider of pharmacy services dedicated to the behavioral health community and those affiliated with managing the cost and quality of their care. For more information about our on-site pharmacy models, please visit us at: www.genoa-qol.com.



Kings View
www.kingsview.org

Booth #108

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.



Mental Health Center of Denver
www.mhcd.org

Booth #105

Reaching Recovery www.reachingrecovery.org The Reaching Recovery program, at the Mental Health Center of Denver, partners with behavioral healthcare agencies to effectively measure the recovery and well-being of your consumers. The four recovery instruments are proven through valid outcomes that show the value of your services and the impact they have on your consumers.



Mobile Therapy
www.mobiletherapy.com

Booth #101

SelfEcho's Mobile Therapy is a mobile and web system that empowers clinicians to better engage clients and improve treatment. Clients track well-being using surveys and sensors on smartphones. Clinicians have access to a powerful dashboard that provides data and contextual information on what's happening with clients in-between therapy sessions.



NextGen Healthcare
www.nextgen.com

Booth #104

NextGen Healthcare delivers simple, smart, integrated, interoperable EHR/practice management and revenue cycle solutions with an intuitive BH-specific workflow to help BH providers improve care, simplify reporting, speed payment, and enhance revenue. Deliver compassionate, comprehensive care with the NextGen® solution, which includes protocols for disease management, population health, and collaborative care.



Utila
<https://utila.us>

Booth #206

Utila believes better communication with providers, and more accessible educational material for clients, improves care outcomes. Utila can be accessed from any device anytime anywhere. Utila is a customizable web based client engagement platform designed for behavioral health providers, telehealth companies, EMR companies, EAP companies, payer organizations and IVR companies.

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2015 CONFERENCE PLANNING COMMITTEE

Susan Blacksher, MSW, MCAS

California Consortium of Addiction Programs and Professionals
(CCAPP)

Adrian Carroll

California Behavioral Health Directors Association (CBHDA)
Substance Abuse Prevention and Treatment (SAPT) Committee
Stanislaus County Behavioral Health and Recovery Services

Rachel Clausen

California Council of Community Mental Health Agencies
(CCCMHA)
EMQ Families First

Toquyen Collier, PMP

California Department of Health Care Services (DHCS)

Monica Davis

CA Association of Social Rehabilitation Agencies (CASRA)
Mental Health America of Los Angeles (MHALA)

John de Miranda, EdM

National Association on Alcohol, Drugs, and Disability

Richard DeLiberty, MSW

Conference Co-Organizer

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Orange County Health Care Agency

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California Hospital Association

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Association of Clinicians for the Underserved (ACU)

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Coalition for Technology and Behavioral Science (CTiBS)
TeleMental Health Institute, Inc.

Ron Manderscheid, PhD

National Association of County
Behavioral Health & Developmental Disability Directors
(NACBHDD)

David A. Minch

California Association of Health Information Exchanges
Bay Area Healthshare

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California Institute of Behavioral Health Solutions (CIBHS)

Victor Singh, LCSW

California Behavioral Health Directors IT Committee
San Joaquin County Behavioral Health Services

Jim Sorg

California Association of Alcohol and Drug Program Executives
(CAADPE)
Tarzana Treatment Centers

Tom Trabin, PhD, MSM

Conference Chair

Lynn Thull, PhD

California Alliance of Child and Family Services (CACFS)

Becky Vaughn

National Council for Behavioral Health

Dan Walters

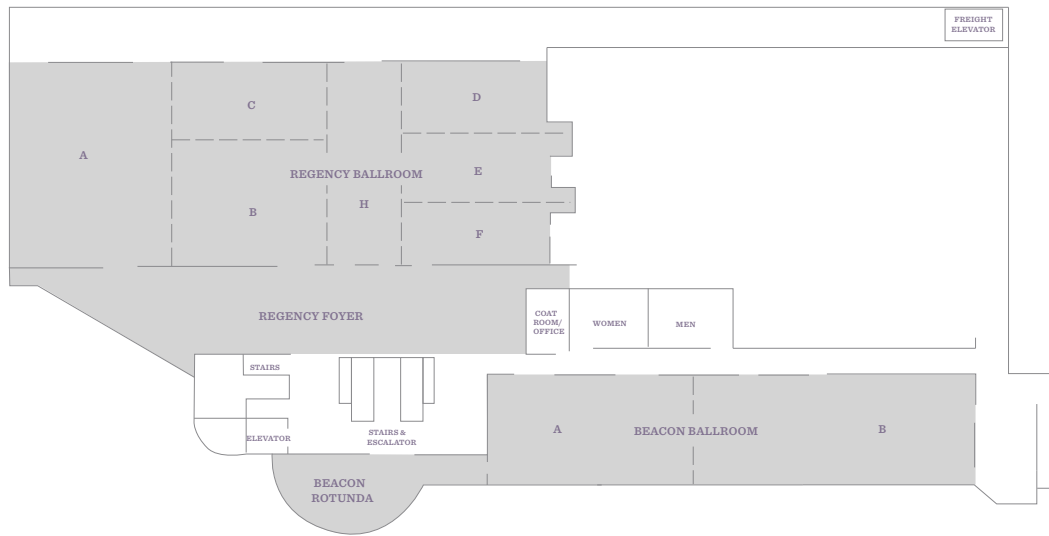
California Behavioral Health Directors Association IT Committee
Kern County Mental Health

Grady L. Wilkinson, MSW

Mental Health Corporations of America
Sacred Heart Rehabilitation Center, Inc.

HOTEL MAP

LOWER LEVEL (First Floor)



UPPER LEVEL (Fourth Floor)

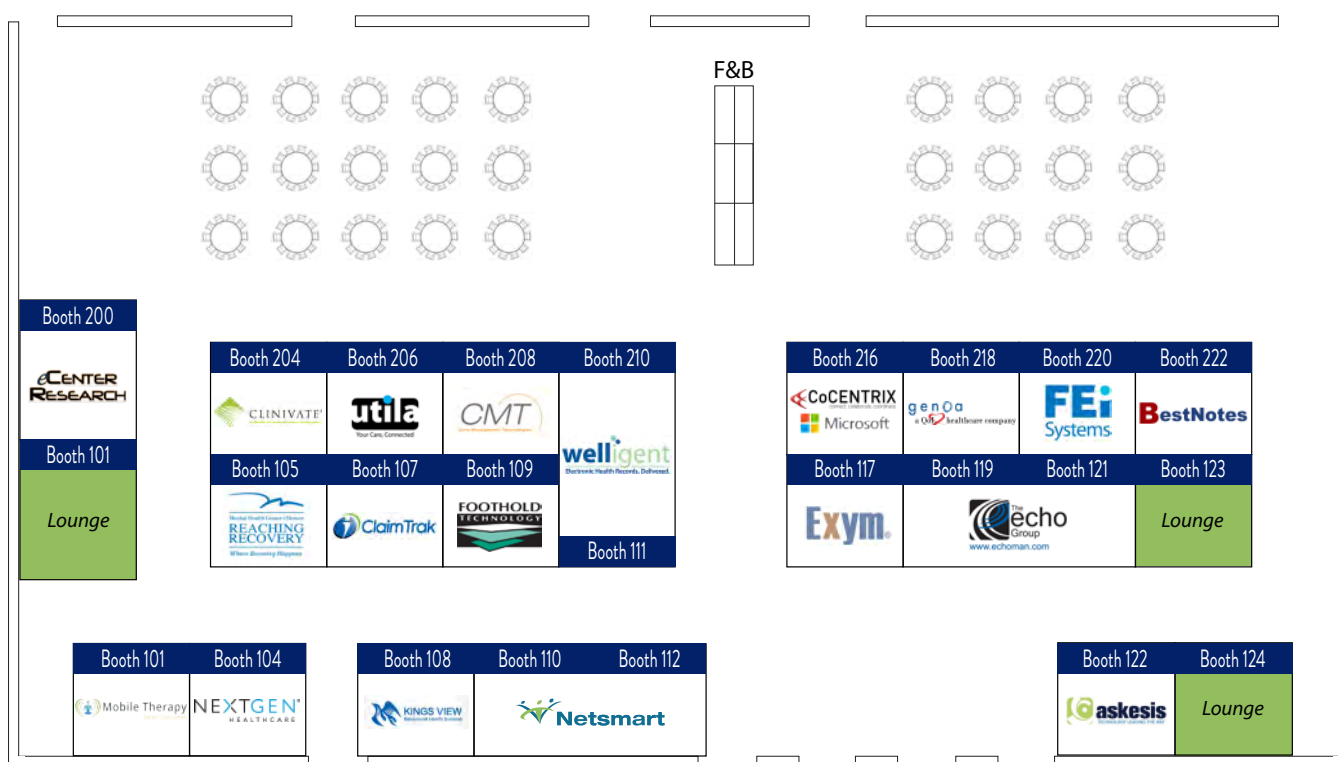


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AND HANDOUTS ARE AVAILABLE AT:**
<http://www.cibhs.org/events-0>

The 15th Annual National Behavioral Health Information Management Conference and Exposition

EXHIBIT HALL MAP

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