Dear Conference Attendee,

It is my pleasure to welcome you to our 2016 Annual Conference and to thank you for attending what I anticipate to be an exciting, collaborative, and informative next couple of days.

Since our inception in 1996, the Association of Clinicians for the Underserved (ACU) has been dedicated to improving the health of underserved populations through a transdisciplinary model of care, and we have developed this conference program to build on that foundation.

This year, we are excited to celebrate our 20th Anniversary, and have prepared a special Founders’ Recognition Reception to commemorate our origins. ACU’s founding is rooted in the National Health Service Corps (NHSC), and we are honored to host Dr. Luis Padilla, Director of the NHSC, as a keynote speaker during the conference. Dr. Padilla will address the collaboration between ACU and the NHSC and we are proud of our continuing engagement with the program. We will continue to push on behalf of the nearly 50,000 members and alumni of the Corps across the country, and ultimately progress toward our goal of providing access to primary care for all underserved communities.

Recognizing our history and mission, I am eager to introduce this year’s theme: *Transdisciplinary Care Across the Health Care Continuum*. During the conference we will have a diverse array of quality workshops, speakers, and exhibitors that demonstrate key aspects in collaborative care. Topics will span from workforce recruitment & retention to addressing the social determinants of health care to implementing health IT systems. Our conference program truly builds on the foundation of our mission, and aims to improve the health of underserved communities across the country.

During the course of this conference, we encourage you to interact and build networks with the like-minded individuals around you. This year, we are thrilled to offer 28 different workshop sessions, 4 keynote speakers, 3 clinical training sessions, 11 poster presentations, and numerous exhibitors within our conference program. Our workshop presenters, speakers, and exhibitors are here to interact with you, learn from your experiences in the field, and engage in a constructive dialogue on how to best serve our communities together as a team.

We hope you explore our interactive exhibits and thank the sponsors for assisting our ability to deliver quality care to the underserved. I sincerely hope you enjoy your stay in Washington, DC. We are very glad you came and we look forward to meeting you during the conference!

Sincerely,

Virna Little, Psy-D, LCSW-R, SAP
President, ACU Board of Directors
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## Board of Directors

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<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Virna Little, PsyD, LCSW-R, SAP R, SAP</td>
<td>President</td>
<td>Behavioral and Integrated Health Care</td>
<td>New York, NY</td>
</tr>
<tr>
<td>Felix L. Nuñez, MD, MPH</td>
<td>Vice President</td>
<td>Public Health, Public Policy, Disparities</td>
<td>Los Angeles, CA</td>
</tr>
<tr>
<td>Jim Hotz, MD</td>
<td>Director</td>
<td>Primary Care, Public Policy, Cancer Screening</td>
<td>Albany, GA</td>
</tr>
<tr>
<td>Bonnie Hillsberg, DC, MHA, MEd</td>
<td>Director</td>
<td>Public Health, Complementary/Alternative Medicine</td>
<td>Silver Spring, MD</td>
</tr>
<tr>
<td>Ellis Frazier, MD</td>
<td>Director</td>
<td>Family Medicine, HIV/AIDS</td>
<td>Chillicothe, OH</td>
</tr>
<tr>
<td>Justin D’Addario</td>
<td>Director – Student member</td>
<td>Stony Brook University School of Medicine</td>
<td>Stony Brook, NY</td>
</tr>
<tr>
<td>Kirsten Thomsen, PA</td>
<td>Secretary</td>
<td>Interdisciplinary Care, Homeless and Migrant Populations</td>
<td>Portland, ME</td>
</tr>
<tr>
<td>Mary Kasal</td>
<td>Treasurer</td>
<td>Health Information Exchanges and Technology</td>
<td>Coos Bay, OR</td>
</tr>
<tr>
<td>Katherine Brieger, RD</td>
<td>Immediate Past President</td>
<td>Health Center Operations &amp; Health Disparities</td>
<td>Pine Island, NY</td>
</tr>
<tr>
<td>Marc Overbeck</td>
<td>Director</td>
<td>PCO National Committee – Chair</td>
<td>Salem, OR</td>
</tr>
<tr>
<td>Earle Rugg</td>
<td>Director</td>
<td>Health Information Exchanges and Technology</td>
<td>Portsmouth, NH</td>
</tr>
<tr>
<td>Michael Mank, OMS-3</td>
<td>Director – Student member</td>
<td>Chicago College of Osteopathic Medicine National Health Service Corps Scholar</td>
<td>Chicago, IL</td>
</tr>
</tbody>
</table>
**Keynote Speakers**

**Ellen Lawton**  
JD  
Principal Investigator and Lead Research Scientist  
George Washington University, National Medical-Legal Partnership

Lawton is an expert in poverty law who is internationally recognized for her leadership in developing the medical-legal partnership approach. She is the chair of the board of directors at Health Imperatives, is a member of the board of directors at Community Resources for Justice, and serves on the national advisory committee for the Primary Care Leadership Program.

Monday — General Session Breakfast, 8:00am — 9:30am

**Luis Padilla**  
MD, FAAFP  
Associate Administrator Bureau of Health Workforce at HRSA; Director of the National Health Service Corps

Dr. Padilla was appointed associate administrator for health workforce in May 2016, and has served as the director of the NHSC since Feb 2015. A committed advocate for the underserved, he is a former NHSC Scholar, a board certified family physician, and previously served as the senior health policy advisor at Unity Health Care, a federally qualified health center network with over 100,000 patients.

Monday — General Session Lunch, 12:15pm — 1:45pm

**Sarah Wattenberg**  
MSW  
Senior Advisor Drug Policy  
U.S. Department of Health and Human Services

Wattenberg has served as the Senior Advisor for Drug Policy in the U.S. Department of HHS to the Assistant Secretary for Health since 2010 and is currently on detail to the White House Office of National Drug Control Policy. Previously, she worked as an executive manager in behavioral health organizations for 13 years before joining Substance Abuse and Mental Health Services Administration (SAMHSA) in 2001.

Tuesday — General Session Breakfast, 8:00am — 9:30am

**Emily Maxson**  
MD  
Medical Director Aledade, Inc.

Dr. Maxson has served as the Medical Director since June 2014 at Aledade, a company founded as a partner with primary care physicians to move away from the fee-for-service system and deliver quality, personalized care to their communities. She previously worked as a primary care physician in internal medicine at Brigham and Women’s Hospital.

Tuesday — General Session Lunch, 12:15pm — 1:45pm
AWARD RECIPIENTS

CLINICIAN OF THE YEAR

DR. SAMUEL DELEON
URBAN HEALTH PLAN
BRONX, NY

Dr. DeLeon is UHP’s Senior Vice President and Chief Medical Officer. He is a visionary leader who has been the clinical backbone to Urban Health Plan’s expansion to 9 health centers, 9 school based and 3 part time clinics. He spearheaded UHP’s adoption of health IT, supported a mentorship program to foster clinical retention, and developed a successful pay for performance program. Valuing continuous quality improvement, Dr. DeLeon co-founded the Institute for the Advancement of Community Health, created a Best Practices Committee, and guided a Community-Research Unit through clinical trials. Under his leadership, UHP was awarded the Asthma Leadership Award by the U.S. Environmental Protection Agency. His commitment to service for vulnerable communities is evident through his work over the past 20 years, and ACU is proud to present Dr. DeLeon with the 2016 Clinician of the Year award.

ORGANIZATIONAL EXCELLENCE

FAMILY FIRST HEALTH
YORK, PA

ACU is proud to recognize Family First Health for their dedication to providing culturally competent, team-based health care for underserved populations. As a primary care facility that offers universal HIV testing, brings care to rural areas, and invests in oral health and integrated behavioral health, they have demonstrated their role as a leader in community health issues. They build workforce from the communities they serve, and foster economic stability through generations. They are truly advocates in service to their community.

CONGRESSIONAL CHAMPION

HONORABLE AL FRANKEN
MINNESOTA SENATOR

Congressman Al Franken is serving his 2nd term as a Minnesota Senator, and has dedicated himself fully to advocating for affordable, high-quality health care as a fundamental right, regardless of income or health status. He serves as the Chairman of the Senate Rural Health Caucus, which prioritized strengthening the National Health Service Corps, and has sponsored many bills promoting health equity, including the Comprehensive Justice and Mental Health Act of 2015.
# Sessions at a Glance

**Sunday, July 31**

## Pre-Conference Clinical Training Sessions

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>3:00pm - 6:00pm</td>
<td>ACU Board Meeting</td>
</tr>
<tr>
<td>Dumbarton</td>
<td>Mental Health: Mental Health First Aid*</td>
</tr>
<tr>
<td>Douglass</td>
<td>Women’s Health: Clinical Training</td>
</tr>
</tbody>
</table>

* = Pre-registration Required

### Welcome Reception

**MC:** Kathy Brieger, RD

**20th Anniversary Recognition**

**Award Recipient Presentations**

- Clinician Hero of the Year: Dr. Samuel DeLeon
- Organizational Excellence: Family First Health
- Congressional Champion: U.S. Senator Al Franken

Seasons—Lower Lobby Level

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Registration opens at 1:30pm in the Events Level Foyer
# Monday, August 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>8:00am - 9:30am</td>
<td>Opening General Session Breakfast</td>
</tr>
<tr>
<td>9:45am - 10:45am</td>
<td>Workshop Session #1: Community Health Center Experiences with Clinical Workforce Vacancies, Recruitment, and Retention, Integrating Family Planning into Primary Care, Six Strategies for Expanding Oral Health Services, Resources for Developing an Understanding of Health Disparities</td>
</tr>
<tr>
<td>10:45am - 11:00am</td>
<td>Break - Refreshment Break</td>
</tr>
<tr>
<td>11:00am - 12:00pm</td>
<td>Workshop Session #2: Identifying Key Factors of Recruitment and Retention for Your Rural Community, Improving Patient Activation Using an Inter-Professional Collaborative Practice (IPCP) Model, Introduction to Medicine on the Navajo Reservation, and Implications for Healthcare Teams in Cross-Cultural Settings, Leveraging Health Informatics to Implement Care Coordination at a Community Health Center</td>
</tr>
<tr>
<td>12:15pm - 1:45pm</td>
<td>General Session Lunch - Lunch Speaker</td>
</tr>
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**Opening General Session**  
MC: Virna Little, Psy-D, LCSW-R, SAP  
Blessing: Keaulana Holt, Papa Ola Lokahi

**Breakfast Speaker**  
Ellen Lawton, JD  
National Medical-Legal Partnership

**General Session**  
MC: Felix Nunez, MD, MPH

**Lunch Speaker**  
Dr. Luis Padilla, MD, FAAFP  
Director, NHSC; Associate Administrator of BHW

Corcoran Ballroom
# MONDAY, AUGUST 1

<table>
<thead>
<tr>
<th>Workshop Session #3</th>
<th>The New Shortage Designation Management System: What Does It Mean for My Community</th>
<th>Clean Eating on a Frugal Budget: Teaching the Underserved Population with Type 2 Diabetes</th>
<th>Engaging the LGBTQ Community in Wellness</th>
<th>Challenges and Use of Data for Population Health Management (Part 1)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>2:00pm - 3:00pm</td>
<td>Douglass</td>
<td>Dumbarton</td>
<td>Smithson</td>
<td>Algonquin</td>
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</table>

<table>
<thead>
<tr>
<th>Break</th>
<th>REFRESHMENT BREAK</th>
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<tbody>
<tr>
<td>3:00pm - 3:30pm</td>
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</table>

<table>
<thead>
<tr>
<th>Workshop Session #4</th>
<th>Promoting Clinician Retention &amp; Recruitment by Supporting Wellness and Reducing Burnout</th>
<th>Bringing Prevention In-House: Integration of Provider Billable Visits into an Evidence-Based Pediatric Obesity Program to Enhance Transdisciplinary Care, Promote Sustainability, and Increase Provider Job Satisfaction</th>
<th>FTCA: Is My Organization Covered for That?</th>
<th>Challenges and Use of Data for Population Health Management (Part 2)*</th>
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<tbody>
<tr>
<td>3:30pm - 4:30pm</td>
<td>Dumbarton</td>
<td>Smithson</td>
<td>Douglass</td>
<td>Algonquin</td>
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<th>Policy Committee</th>
<th>Membership Committee</th>
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<td>4:45pm - 5:45pm</td>
<td>Smithson</td>
<td>Douglass</td>
<td>Dumbarton</td>
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<table>
<thead>
<tr>
<th>Evening</th>
<th>EVENING FREE</th>
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</table>

- Clinical Education
- Cultural Competency
- Health IT
- Patient Engagement
- Policy & Advocacy
- Recruitment & Retention
- Team-Based Care
- Other
TUESDAY, AUGUST 2

**GENERAL SESSION**
MC: Kirsten Thomsen, PA

**POSTER SESSION PRESENTATIONS & JUDGING** (Listed on pg. 12)

**ASK THE EXPERT DISCUSSION TABLES**

**BREAKFAST SPEAKER**
Sarah Wattenberg, MSW
Senior Advisor, Office of National Drug Control Policy
Corcoran Ballroom

**EXHIBIT HOURS BEGIN 8:30AM • BALLROOM FOYER**

<table>
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<tr>
<th>Workshop Session #5</th>
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<tr>
<td>Expanding Reproductive Health Services to Adolescents: Opportunities and Challenges to Introducing Nexplanon in Pediatric Primary Care</td>
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<tr>
<td>Implementing Educational Interventions for Complex Populations at an FQHC: Lessons from the Frontline</td>
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<tr>
<td>Kids Against Cavities: Empowering Kids for a Lifetime of Good Oral Health (And Generating Revenue While Doing It)</td>
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<tr>
<td>Utilizing Your Health IT to Achieve Great Population Health Outcomes</td>
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</table>

- Algonquin
- Douglass
- Smithson
- Dumbarton

<table>
<thead>
<tr>
<th>Workshop Session #6</th>
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<tr>
<td>San Antonio Access: Responding to Health Insurance Literacy Needs</td>
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<tr>
<td>Addressing Race, Power and Privilege in Clinical Settings</td>
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<tr>
<td>Navigating Troubled Waters: Walking with Patients Across the Continuum of Care in a Free Clinic</td>
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<tr>
<td>Use of Technology and Tele-medicine: There is a Team Behind the Machine</td>
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</tbody>
</table>

- Algonquin
- Smithson
- Dumbarton
- Douglass

**REFRESHMENT BREAK**
### Tuesday, August 2

**General Session**  
MC: Bonnie Hillsberg, DC, MHA, MEd

**Raffle Drawing**  
Turn in your Session Evaluations for raffle tickets.

**Lunch Speaker**  
Emily Maxson, MD  
Medical Director, Aledade, Inc.

**Closing Remarks**  
MC: Virna Little, Psy-D, LCSW-R, SAP  
Corcoran Ballroom

<table>
<thead>
<tr>
<th>Time</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>12:15pm - 1:45pm</td>
<td>General Session Lunch</td>
</tr>
<tr>
<td>1:45pm - 2:15pm</td>
<td>Exhibit Visitation</td>
</tr>
</tbody>
</table>
| 2:15pm - 3:15pm | Workshop Session #7  
Dumbarton: The Federal Budget and Appropriations: Funding Outlook for the National Health Service Corps  
Algonquin: Teaching Population Health to Medical and Nursing Students: What, Why, and How?  
Smithson: The Delivery of Outstanding Culturally Responsive Health Care: Why and How?  
Douglass: Lessons Learned and Best Practices in Rural Telemedicine |
| 3:30pm - 5:00pm | Policy Packet Pickup  
Conservatory: Packet Pickup for Hill Visits  
Clinical Education  
Cultural Competency  
Health IT  
Patient Engagement  
Policy & Advocacy  
Recruitment & Retention  
Team-Based Care  
Other |

**Please Visit Our Exhibits — Exhibit Hours End 3:30pm**  
(Listed on pg. 20-21)
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30am</td>
<td>Hill Day</td>
</tr>
<tr>
<td>9:30am</td>
<td>Capitol Hill</td>
</tr>
<tr>
<td>10:00am</td>
<td>Briefing Session</td>
</tr>
<tr>
<td>2322</td>
<td>ACU ON THE HILL BUSES TO CAPITOL HILL</td>
</tr>
<tr>
<td>10:00am</td>
<td>ACU HILL BRIEFING</td>
</tr>
<tr>
<td>9:30am</td>
<td>Hill Meetings</td>
</tr>
<tr>
<td>4:00pm</td>
<td>Conclusion</td>
</tr>
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**WEDNESDAY, AUGUST 3**

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>9:30am</td>
<td>ACU HILL BRIEFING</td>
</tr>
<tr>
<td>2322</td>
<td>2322 Rayburn House Office Building</td>
</tr>
</tbody>
</table>

**HILL MEETINGS**

**VARIOUS CONGRESSIONAL OFFICES**

**ARRANGED BY ATTENDEES**

**END OF CONFERENCE**
Saving you thousands on the products, services, supplies & equipment you use everyday.

* Group Purchasing Made Easy
* FREE to Join
* No Binding Contracts
* Exceptional Customer Service

RCHN Community Health Foundation is proud to collaborate with the Association of Clinicians for the Underserved to promote health care access and quality for underserved communities.
Poster Session

Poster Presentations: Tuesday, 8:00 am — 9:30 am in the Corcoran Ballroom

P1
Scaling Up Depression Screening in Primary Care Using a Team Based Model
Jennifer Genuardi, Director of Clinical Best Practices and Clinical Education at Urban Health Plan, Inc.

P2
Characteristics of Suicide Attempters in a Community Mental Health Setting
Catherine Skulnik, Special Projects Coordinator at The Institute for Family Health

P3
Engagement of a Student-Run Free Clinic as a Portal to a Primary Care Career
Elizabeth Roessler, Assistant Professor at Yale Physician Associate Program, Co-medical Director at HAVEN Free Clinic

P4
Utilizing a Community-University Partnership to Provide Meaningful Multicultural and Interprofessional Education Experiences for Health Professions Students
Karen Mielke, Assistant Professor of Medicine at St. Catherine University

P5
Addressing Disparities in Diabetes Screening in Vulnerable Populations: Leveraging Data and Developing Trans-disciplinary Patient-Centered Approaches
Nivedita Mohanty, Director of Evidence Based Practice at Alliance of Chicago Community Health Services

P6
What and How Do Students Learn in an Interprofessional Student-Run Clinic? an Educational Framework for Team-Based Care
Desiree Lie, Clinical Professor of Family Medicine at University of Southern California

P7
Voices from a Free Clinic
William Markle, MD, Director of the Free Clinic at University of Pittsburgh Medical Center

P8
Piecing Together Pharmaceutical Access for Indigent Patients
Kara Stencel, Pharmacy Director at HAVEN Free Clinic, Student at Yale PA Program

P9
Developing a Health Education Program for a Nonprofit Drug and Alcohol Rehabilitation Center Led by Health Professional Students
Julia Marsala, Medical Student at Pennsylvania State University College of Medicine

P10
Expanding Reproductive Health Services to Adolescents: Opportunities and Challenges to Introducing Nexplanon (Etonogestral Implant) in Pediatric Primary Care
Jennifer Jiggetts, Reproductive Health Coordinator at Children’s National Health System

P11
Bridging the Coordination Gap: How a Successful Referral Process Facilitates Transdisciplinary Care and Better Outcomes for Patients with Asthma
Lisa A. Gilmore, MBA, MSW, Senior Health Communications and Policy Manager at The Cadmus Group, Inc.; Allison Robinson, Senior Analyst at The Cadmus Group, Inc.
This session will discuss six strategies that community health centers and other healthcare providers can use to begin or expand oral health programs for the underserved and ensure a team-based approach. These strategies are:

1. Start-up/expansion
2. Contracting for services
3. Tele-dentistry
4. Inter-professional collaboration
5. Workforce innovation
6. Dental practice redesign

The goal is to leave session participants with increased confidence that oral health programs for the underserved can be successful and sustainable and that they very likely could consider and implement one to several of the six strategies shared in this session to expand oral health services and improve oral health outcomes for their patients.

Resources for Developing an Understanding of Health Disparities

Algonquin

Susan White, MD, Director of Didactic Education at Boston University Physician Assistant Program

One of the challenges of providing care to a vulnerable population is to understand the barriers facing patients in achieving and maintaining their health. To be effective, primary care providers must develop an understanding of individual barriers as well as community barriers to good health. This workshop reviews online tools that offer both general and community-specific interactive learning activities to help primary care providers better understand the community and the challenges of their patients. A variety of tools including Spent, bias assessment, medication simulation, Dartmouth Health Atlas, Google Maps, and community food resources will be presented.

Identifying Key Factors of Recruitment and Retention for Your Rural Community

Dumbarton

Mike Shimmens, Executive Director at 3RNet; Michelle Var-cho, MBA, SPHR, Director of Education Outreach at 3RNet

This training is meant to help recruitment stakeholders explore the key factors of recruitment to Community Health Centers in rural, urban, and underserved areas. The factors are...
categorized into five classes: geographic, economic, scope of practice, medical support, and facility/community support, and adapted from the Critical Access Hospital Community Apgar Questionnaire, a validated research tool implemented and developed by Dr. Ed Baker, Boise State University and Dr. Dave Schmitz, Idaho Family Medicine Residency. By exploring each factor and conceptualizing how that factor applies to your community and facility, you will be better able to identify and communicate strengths, and invest in challenges.

**Improving Patient Activation Using an Interprofessional Collaborative Practice (IPCP) Model**

*Douglass*

Erin Clarkson, Social Worker at UAB School of Nursing; Shannon DeLuca, MSN, CRNP, AGACNP-BC, Lead Nurse Practitioner at HRSA Heart Failure Clinic at UABH, Instructor at UAB School of Nursing

Knowledge about engagement by uninsured patients who obtain access is sparse. Patient activation, defined as knowledge, skills, and confidence managing one’s health is low among the uninsured. This session will review the IPCP transitional care model to reduce 30-day readmissions in uninsured heart failure patients that was established by UAB School of Nursing and Hospital, where teams have successfully incorporated these interventions into practice. Outcomes associated with activation strategies include: improved medication adherence, increased communication, improvement in patients identifying their role in disease management.

**Introduction To Medicine on The Navajo Reservation, and Implications for Healthcare Teams in Cross-Cultural Settings**

*Smithson*

Eileen Barrett, MD, MPH, FACP, Faculty at University of New Mexico

This workshop will discuss where and how Navajo and other Native Americans receive healthcare, how health outcomes differ between Native and non-Native patients, and how health outcomes differ between different tribes. There will be an introduction to Navajo culture to foster understanding of unique issues that affect these patients, their communities, and their healthcare teams in a manner that is emblematic of challenges facing other tribes and their providers, and an interactive facilitated group discussion on how cultural considerations affect the care of Native patients, regardless of setting as well as implications for other cross cultural settings.
better understand the proposed changes and weigh in as appropriate. This session will review the progress to date on implementation of the new SDMS program, as well as the potential impact on HPSA designations in the future.

**Clean Eating on a Frugal Budget—Teaching the Underserved Populations with Type 2 Diabetes**  
**Dumbarton**  
Anita King, DNP, FNP-BC, MA, CDE, FAADE, Professor at University of South Alabama

Diabetes is a global epidemic and over 29 million in the United States have diabetes. Diabetes often has costly medical complications with resulting premature death. The author's home state of Alabama is one of the top 5 states with diabetes where there is also a strong correlation with poverty, obesity, and Type 2 diabetes. The underserved populations have several barriers to proper nutrition which is the cornerstone of diabetes management. The intent of this podium presentation, based on Nola Pender's Health Promotion Model, is to provide practical teaching strategies that the nurse in any setting can apply to promote diabetes care and the prevention of complications.

**Engaging the LGBTQ Community in Wellness**  
**Smithson**  
Jarett Sell, MD, Assistant Professor at Penn State Hershey Medical Center; Rosemary Browne, President & CEO at Elder Health Services

During this presentation, we will share the experience of a non-profit organization whose mission it is to serve the mental health and medical needs of the lesbian, gay, bisexual, transgender, or queer/questioning (LGBTQ) community in central Pennsylvania. The organization seeks to address community needs and provide culturally appropriate disease prevention and health promotion services. Using national statistics and data from a recent local needs assessment, this workshop will identify gaps in care that can be used to design LGBTQ specific health programs. We will review the current literature and guidelines on providing competent LGBTQ healthcare and share ways that practices can engage the LGBTQ community.

**Promoting Clinician Retention & Recruitment by Supporting Wellness and Reducing Burnout**  
**Dumbarton**  
Eileen Barrett, MD, MPH, FACP, Faculty at University of New Mexico

This workshop will present organizational strategies to promote retention and recruitment by reducing burnout and increasing job satisfaction, including: protecting clinicians from unnecessary challenges; providing skills and tools to overcome challenges; and supporting leaders who are committed to supporting work/life balance. Specific interventions include: reducing disorganization, promoting shared values, individualizing work schedules, and supporting clinician wellness.

**Bringng Prevention In-House: Integration of Provider Billable Visits into an Evidence-Based Pediatric Obesity Program to Enhance Transdisciplinary Care, Promote Sustainability, and Increase Provider Job Satisfaction**  
**Smithson**  
Jessica Wallace, MPH, PA-C, Denver Health; Shanna Knierim, CPNP, Denver Health; Jennifer Rosen, MPH, CPNP, Denver Health; Lara Penny, MD, MPH, Denver Health

**Challenges and Uses of Data for Population Health Management (Part 1)**  
**Algonquin**  
David Hartzband, DSc, Director of Technology Research at RCHN Community Health Foundation; David Stevens, MD, FAAFP, Research Professor at Milken Institute School of Public Health

*Pre-registration required*

This is a two-part workshop that will primarily be a problem solving exercise to discuss data findings from the current Foundation population health project. We will work with attendees to share experiences in population health projects and derive potential solutions to data issues in such projects. Ultimately, these learning lab sessions will allow participants to define local challenges to using and analyzing data, and identify potential solutions to data capture, analysis, and related issues for population health management.
Denver Health (DH), a safety net hospital/FQHC network in Colorado, runs two programs utilizing a group visit model: MEND (Mind, Exercise, Nutrition, Do It!), an evidence-based intensive obesity intervention for families, and CenteringPregnancy, a group prenatal care program for women due at the same time. Both programs have been highly effective. MEND participants show statistically significant changes in BMI, waist circumference, and physical fitness, as well as changes in nutrition, physical activity, and self-esteem. CenteringPregnancy participants have lower rates of preterm birth, higher rates of breastfeeding, and reductions in health disparities. Provider involvement in both programs serves to legitimize and emphasize the importance of prevention, and ensures sufficient time to provide education and counseling in a supportive setting. Billable visits also provide a revenue stream to continue programming regardless of grant funding. Finally, participation increases provider satisfaction and addresses the root causes of many chronic diseases and morbidity.

**FTCA: Is My Organization Covered for That?**

*Douglass*

Martin J. Bree, Esq., Feldesman Tucker Leifer Fidell; Molly S Evans, Esq., Feldesman Tucker Leifer Fidell; Matthew Freedus, Esq., Feldesman Tucker Leifer Fidell

Increasingly, health centers are relying upon a variety of methods and arrangements (both through internal resources and in conjunction with other community-based providers) to deliver services to their patients as well as to their medically underserved communities. By improving health outcomes while reducing disparities, utilizing innovative approaches to care is beneficial to both the patient and the community at large. These different methods and arrangements may fall outside the scope of the Federal Tort Claims Act (FTCA). This session will review who is covered by FTCA, under what circumstances, and key limitations of the coverage.

**Challenges and Uses of Data for Population Health Management (Part 2)**

*Algonquin*

David Hartzband, DSc, Director of Technology Research at RCHN Community Health Foundation; David Stevens, MD, FAAFP, Research Professor at Milken Institute School of Public Health

See Part 1 on page 15 for description.

**Expanding Reproductive Health Services to Adolescents: Opportunities and Challenges to Introducing Nexplanon in Pediatric Primary Care**

*Algonquin*

Jennifer Jiggetts, Reproductive Health Coordinator at Children’s National Health System; Megan Higdon, Program Associate, CNHS; Yooni Choi, Family Services Associate, CNHS

Long Acting Reversible Contraceptives (LARCs) are the most effective contraceptive available to adolescents. When educated about the benefits of and given easy access to LARCs, teens are more likely to select them as birth control. The Goldberg Centers for Community and Pediatric Health operate seven primary care centers in DC. Until January 2015, only one of our seven health centers offered Nexplanon (a LARC) to teens. Since then, the remaining six health centers worked to increase their capacity to offer Nexplanon. This presentation will speak to challenges and opportunities we faced during this process. Our goal is to provide a road map for health centers who plan to incorporate Nexplanon in their primary care practices.

**Implementing Educational Interventions for Complex Populations at an FQHC: Lessons From the Frontline**

*Douglass*

Mary Blankson, DNP, APRN, FNP-C, Chief Nursing Officer at Community Health Center, Inc.; My Phuong Tong, Program Manager; Ianita Zlateva, MPH, Director of Research

This workshop will help healthcare professionals learn about the Complex Care Management (CCM) program at the Community Health Center, Inc. (CHC) and discuss tools and approaches required to address the many needs of "complex patients." At CHC, "complex patients" include, but are not limited to, patients with recent hospital admissions, patient with 4+ chronic conditions, uncontrolled hypertension or diabetes, and patients who need significant coordination outside of face-to-face visits. The CCM program is rooted in activat-
Kids Against Cavities—Empowering Kids for a Lifetime of Good Oral Health (And Generating Revenue While Doing It)

*Smithson*

LaJuan Mountain, DMD, Dental Director at Family First Health; Joseph Mountain, DMD, Dental Director

Kids Against Cavities, a comprehensive pediatric oral health system of care, is a concerted effort to minimalize the barriers that prohibit children from receiving the dental care they deserve and often, desperately need. Family First Health fixed locations function as dental "hubs" since they are positioned throughout South Central Pennsylvania to assist underserved populations. Satellite locations, services, and partnerships or "spokes" were created to increase access and decrease barriers to care. Each "spoke" has been carefully crafted to provide appropriate outreach, support, and preventative services to a larger demographic and fosters interagency partnerships. In collaboration with Head Start, WIC, and school districts, Kids Against Cavities deploys mobile equipment on-site at school locations to connect with 1,800 at-risk children providing them with comprehensive dental services while contributing to our financial viability by providing reimbursable services off-site.

Utilizing Your Health IT to Achieve Great Population Health Outcomes

*Dumbarton*

Chris Espersen, President at Espersen & Associates

This session will discuss one health centers population health journey, and how we manage many different populations in many different ways, all the while trying to provide excellent care to all and avoiding health disparities. We discuss managed care, pay for performance quality measures, coordination between 2703 health homes, Accountable Care Organization models, and other community partnerships. This session is intended to be interactive, and participants will come away with tools to take back to their organization and examine their current and future opportunities. Discussions will include how we track progress, quality improvement initiatives to improve population health, negotiations with payers, and interventions that improve the quality of care provided to patients.

WORKSHOP SESSION #6
11:00 am — 12:00 pm

San Antonio Access: Responding to Health Insurance Literacy Needs

*Algonquin*

Ruth Berggren, MD, FACP, Director of Center for Medical Humanities & Ethics at UTHSCSA; Melanie Stone, MPH, Med, Director of Community Service Learning; Medical Students: Larissa Aroche-Gutierrez; Brian Duffy; Anu Kapadia; Chelsea Lehman; Jerry So; Josh Walther

During the first Health Insurance Marketplace open enrollment period, established by the Affordable Care Act (ACA), Bexar County, Texas, enrolled 76,212 individuals through the Marketplace. Access Care Texas!: ACT Together for Health (ACT) is a student-led project at the University of Texas Health Science Center at San Antonio. In partnership with community organizations, ACT mobilized in the fall of 2013 to help educate the approximately 214,000 Bexar County uninsured residents about the ACA through outreach at health fairs and small-group information sessions. From these events, ACT identified the community need for a health insurance "literacy toolkit" one that distills the variety of existing health insurance education materials into a singular, easy-to-use resource- by creating a smartphone app. This presentation will outline the process of creating a technology-based toolkit designed for and by the community and the accompanying challenges and successes with implementation.
TUESDAY, AUGUST 2

**Addressing Race, Power, and Privilege in Clinical Settings**
*Smithson*
Heather-Lyn Haley, PhD, Assistant Professor at UMass Medical School

This session will present clinicians with a framework to address strategies and issues around race, power, and privilege, with a focus on disrupting racism and improving clinical processes and outcomes. UMass Medical School /MassAHEC Network will share their implementation of an UNDOING RACISM framework adapted for a population health clerk-ship for medical and advanced practice nursing students.

**Navigating Troubled Waters: Walking with Patients Across the Continuum of Care in a Free Clinic**
*Dumbarton*
Barbara Horner-Ibler, MD, MDiv, MSW, Medical Director at Bread of Healing Clinic; Beth Thorson, LCSW, ACSW, Director of Social Services for Free and Community Clinic Collaborative and the Bread of Healing Clinic; Michele Cohen, PhD, LPC, LCPC, Director of Behavioral Health Services

Bread of Healing Clinic is a free clinic on the north side of Milwaukee, located in 3 churches that opened in 2000 to serve the uninsured. Behavioral health services were added in 2004, dental services in 2009, and social services in 2011. Despite the ACA, we continue to find patients without insurance or patients with insurance, who cannot successfully navigate the health care system. We have learned over time how much each of the abovementioned disciplines offers to each patient. This presentation will explore the following: How do differing disciplines work together in individual patients? How do we communicate across the disciplines to insure holistic patient care? How can other clinics expand their services to provide more expansive care to their patients?

**Use of Technology and Telemedicine: There is a Team Behind the Machine**
*Douglass*
Terry Yonker, RN, FNP, Telededicine Clinical Care Coordinator at Finger Lakes Community Health; Carly Sisson, BA, MA, Patient Navigator/Teledental Coordinator at Geneva Community Health

Telehealth and Health Information Technology, (HIT), have the capacity to offer virtually unlimited options to a patient regarding their healthcare. However, the success of these programs is not merely dependent upon the technology itself; a complex and thorough team is needed to take advantage of the HIT that is available. In addition to the providers and nursing staff, the presence of an Outreach worker, such as a Community Health Worker, a Care Manager, or a Patient Navigator can increase the level of healthcare that is given to the patient. Outreach has proven to be essential to the success of the Telehealth Programs at Finger Lakes Community Health, thus verifying that the mere act of buying the equipment is not enough to achieve success.

**The Federal Budget and Appropriations: Funding Outlook for the National Health Service Corps**
*Dumbarton*
Craig Kennedy, MPH, Executive Director at Association of Clinicians for the Underserved; Marc Wetherhorn, MBA, Founder at Marc Wetherhorn Consulting; Patricia DeLoatche, Senior Policy Advisor at Sidley Austin LLP

This is an interactive session on the history of funding for the National Health Service Corps (NHSC) program, and how the federal budget and appropriations process has impacted the program. The workshop will review the original authorization of the NHSC, the American Recovery and Reinvestment Act (ARRA), the Affordable Care Act (ACA), and the recent passage of the Medicare Access and CHIP Reauthorization Act (MACRA). The NHSC has transitioned from a traditional discretionary program that was authorized and annually appropriated, to a program that is permanently authorized and funded through a mandatory Trust Fund mechanism. Unfortunately, the trust fund expires after fiscal year 2017. This workshop will include advocacy tips and discussion to ensure the future of this important federal workforce program.

**Teaching Population Health to Medical and Nursing Students: What, Why, and How?**
*Algonquin*
Suzanne Cashman, DSc, Professor and Advisor to MassAHEC Network at University of Massachusetts Medical School
Teaching medical and nursing students elements of population health through partnerships between community health centers (CHCs) and an academic health center offers mutually beneficial experiences and outcomes for students, health centers, and patients. Through a long standing partnership between the University of Massachusetts Medical School/Worcester and CHCs, medical and nursing student learners are placed for a two week immersion experience every autumn as well as summer placements. Students begin to understand the importance of taking an upstream focus and working as part of an interprofessional team to effect policy changes at multiple levels.

The Delivery of Outstanding Culturally Responsive Health Care: Why and How?

Smithson

Jeffrey Ring, PhD, Principal at Health Management Associates

This interactive and experiential workshop will explore awareness/attitudes, knowledge, and skills components of culturally responsive health care. Participants will receive tangible clinical practice strategies to improve relationship-based care delivery, built on a foundation of enhanced self-awareness and trust-building. Participants will leave with a deeper understanding of health disparities and how their work can positively impact these devastating realities.

Lessons Learned and Best Practices in Rural Telemedicine

Douglass

Adam Bullian, Chief Operating Officer at QIP Solutions; John Kornak, Director of Telehealth at University of Maryland Medical Center; Robert Zimmerman, Chief Executive Officer at Health Technology Access Foundation

After providing telehealth services in rural Maryland for several years, this session will provide attendees with information on the lessons the presenters have learned and best practices they have developed in delivering telemedicine services. Topics will include: 1) how to initiate a telemedicine program, 2) roadblocks and solutions based on best practices associated with implementing a telehealth program, 3) ensuring security and privacy in telemedicine, 4) how to secure funding for a telemedicine program, and 5) benefits of implementing a telemedicine program.
The Rural Health Information Hub (RHIhub), formerly the Rural Assistance Center, is the nation's rural health information source. Website offers online library, coverage of rural issues, state guides, toolkits, program models, and more. Provides customized assistance by phone or email. Funded by the Federal Office of Rural Health Policy.

The West Virginia Primary Care Association represents a membership of 33 Community Health Center Organizations in West Virginia. We have developed a Recruitment Program to assist our members in the recruitment of high quality Health Care Professionals to serve their diverse and often underserved communities.

Trividia Health, Inc. is the only company exclusively focused on helping people with diabetes maintain a healthy lifestyle. From meters and test strips, sharps, nutrition and skin care, each TRUE solution complements the next, forming one powerful, interconnected system to help people with diabetes keep the body in balance.

The National Health Service Corp helps bring health care to those who need it most. Since 1972, we have been building healthy communities by connecting primary health care providers to areas of the United States with limited access to care. More than 50,000 primary care medical, dental, and mental and behavioral health professionals have served in the National Health Service Corps since its inception. Today, 9,600 NHSC members provide culturally competent care to more than 10 million people.

EagleForce Health, a division of EagleForce Associates, Inc., delivers the most advanced evidence-based clinical insights and business intelligence for accurate and persistent informing available today. Leveraging the secure technology that has provided knowledge and analytics to both the defense and intelligence sectors for many years, EagleForce Health now brings this high pedigree of advanced analytics, information sharing, security, and privacy to healthcare.

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Please see page 21 for descriptions.
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Pfizer RxPathways helps eligible patients get access to their Pfizer medicines by connecting them to a range of prescription assistance programs, including insurance counseling, co-pay help, providing Pfizer medicines for free or at a savings, and more. In the last five years alone (2011-2015), Pfizer helped more than 2 million uninsured and underinsured patients across the United States receive over 25 million Pfizer prescriptions for free or at a savings, making it the most comprehensive program of its kind.

McKesson Medical-Surgical delivers a comprehensive offering of healthcare products, equipment, technology, and service solutions to support Community Health Centers. By partnering with our customers to provide business solutions and supplies, it allows them to focus on what matters most -- delivering quality healthcare.

CommonWealth Purchasing Group is the leading group purchasing organization for community health centers and other non-profit organizations. With 500 members and a portfolio of over 50 vendors, we save organizations millions on the products and services they use every day.

The RCHN Community Health Foundation is a not-for-profit foundation established to support community health centers through strategic investment, outreach, education, and cutting-edge health policy research. The only foundation in the U.S. dedicated solely to community health centers, RCHN CHF builds on a long-standing commitment to providing accessible, high-quality, community-based healthcare services for underserved and medically vulnerable populations.
Centene is committed to transforming the health of the communities we serve, one person at a time. Whether at home, in a community health center or other health facility, our focus is the same – quality care, locally delivered. We value our partnership with the Association of Clinicians for the Underserved (ACU) and other health providers and advocates who share this same commitment.