



**MANY FACES  
OF  
COMMUNITY HEALTH**

**2008 CONFERENCE**

**October 30-31, 2008**

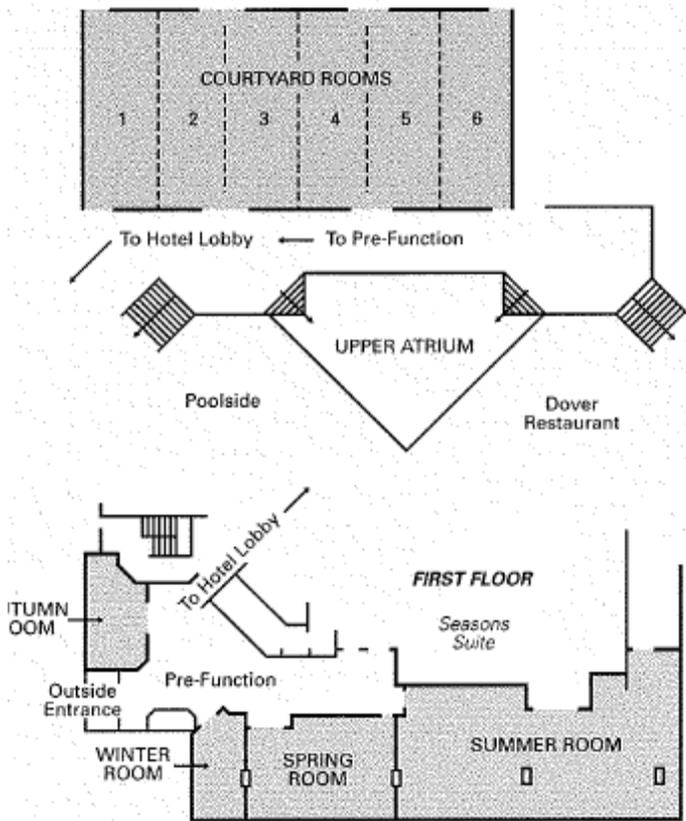
**ONSITE GUIDE**

**DoubleTree Park Place Hotel - St. Louis Park, MN**

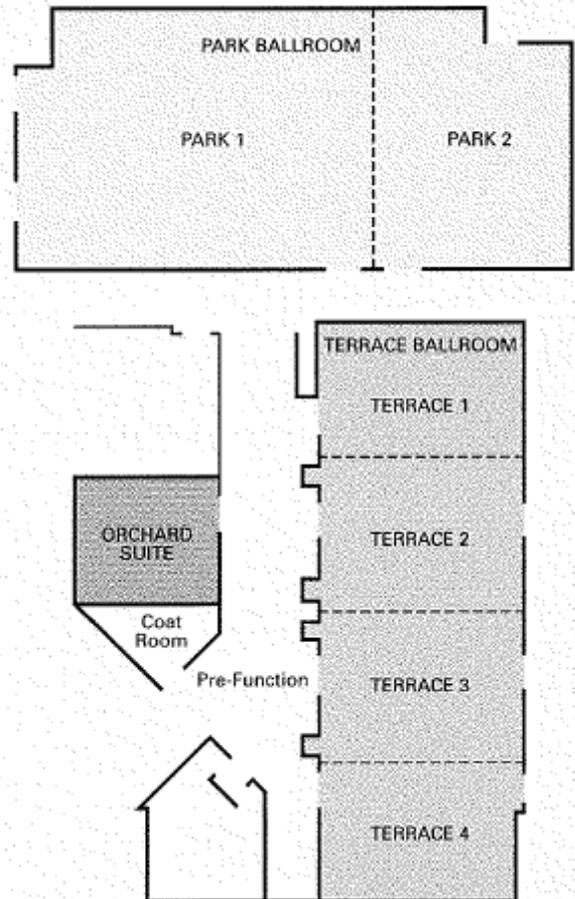
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# Hotel Floor Plans

## FIRST FLOOR



## SECOND FLOOR



# Agenda at a Glance

## Thursday, October 30, 2008

7:30 – 8:30 am	Registration/ Continental Breakfast/ Exhibit Set-up	
8:30 – 10:15 am	Welcome & Keynote Address: “Engaging a Community in Chronic Disease Management”	Park 1 Ballroom
10:15 – 10:45 am	Break / Exhibits Open	Terrace Ballroom
10:45 – 12:00 pm	CONCURRENT SESSIONS I	
	A. Creating a Future Healthcare Workforce	Orchard Suite
	B. Cutting without Bleeding: Keeping Your CHC Going Strong	Courtyard 6
	C. ICSI Guideline for Prevention of Chronic Disease	Park 2 Ballroom
	D. Diabetes Care Coordination: Case Manager and CHW Model	Park 1 Ballroom
12:00 – 1:00 pm	Lunch	Atrium
1:00 – 1:45 pm	PLENARY: “Diabetes: A Patient's Perspective”	Park 1 Ballroom
1:45 – 2:00 pm	Break / Exhibits Open	Terrace Ballroom
2:00 – 3:15 pm	CONCURRENT SESSIONS II	
	A. Legislative and Policy Update	Park 2 Ballroom
	B. Incentive-Based Compensation, Part I	Courtyard 6
	C. ICSI Guideline for Prevention of Chronic Disease – <i>repeat session</i>	Park 1 Ballroom
	D. Getting Behind the Smoke Screen: One Clinic’s Successful Tobacco Cessation Program	Orchard Suite
3:15 – 3:45 pm	Break / Exhibits Open	
3:45 – 5:00 pm	CONCURRENT SESSIONS III	
	A. Opportunities under the New Safe Harbor Rule	Orchard Suite
	B. Incentive-Based Compensation, Part II	Courtyard 6
	C. Is Vitamin D the New Silver Bullet for Preventing and Managing Chronic Disease?	Park 1 Ballroom
	D. Translating Diabetes Medications into Protocol	Park 2 Ballroom
5:00 – 7:00 pm	Evening Reception featuring the Isaac Zuckerman Combo	Atrium

## Friday, October 31, 2008

7:30 – 8:15 am	Registration / Continental Breakfast / Exhibits Open	
8:15 – 8:45 am	Welcome & Awards	Park 1 Ballroom
8:45 – 10:15 am	PLENARY: “Medical Home: Old Paradigms/New Direction”	Park 1 Ballroom
10:15 – 10:45 am	Break / Exhibits Open	Terrace Ballroom
10:45 – 12:00 pm	CONCURRENT SESSIONS IV	
	A. Minnesota Health Care Reform: Nuts & Bolts for FQHCs on Structuring & Paying for Care Coordination	Park 1 Ballroom
	B. The Agony and Ecstasy of EHR Implementation	Courtyard 6
	C. The Relationship of Sleep Apnea to Diabetes and CVD	Park 2 Ballroom
	D. Reaching Across the Pharmacy Continuum	Orchard Suite
12:00 – 12:15 pm	Box Lunch Pick Up / Final Exhibit Viewing	Terrace Ballroom
12:15 – 2:15 pm	WORKSHOP: “Cultural Perspectives on End of Life Care”	Park 1 Ballroom

***Rooms Subject to Change – Follow Signage***

## Thanks to Our Event Sponsors

Host Sponsor	Blue Cross Blue Shield Minnesota 
Conference Bags	MDH Office of Rural Health & Primary Care 
Friday Box Lunch	UCare 
Evening Reception	Metropolitan Health Plan  Novartis 
Thursday Continental Breakfast	Delta Dental of Minnesota 
Friday Continental Breakfast	Halleland Health Consulting 
Speaker Sponsor	Medica Foundation 
Scholarships	David Martin Agency Value in Purchasing HealthPartners Medicare Diabetes Screening Project Steps to a Healthier Minneapolis Minnesota Diabetes Program 

Breaks	WIPFLI Eli Lilly Diabetes Care	 
CEU Sponsor	Minnesota Nurses Association	
CME Sponsor	Stratis Health	

## Continuing Education

### ***AMA PRA Category 1 Credit™***

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Minnesota Medical Association (MMA) through the joint sponsorship of Stratis Health and Many Faces of Community Health Conference partners. Stratis Health is accredited by the MMA to provide continuing medical education for physicians.

Stratis Health designates this educational activity for a maximum of 9.5 hours of *AMA PRA Category 1 Credit™*. Physicians should claim credit commensurate with the extent of their participation in the activity.

### ***Nursing Contact Hours***

This program is co-provided with the Minnesota Nurses Association which is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.



\*11.0 ANCC contact hours will be awarded to nurses attending this educational activity(6.25 Day 1; 4.75 Day 2).

\*equivalent to 13.2 Minnesota Board of Nursing contact hours (7.5 Day 1; 5.7 Day 2)

### ***Dietitian Continuing Education Credits***

Continuing Education Credits for dietitians will be provided.

## Welcome to the 3rd Annual Many Faces of Community Health Conference

This two-day event for health professionals is focused on improving health and reducing health disparities in underserved populations and among those living in poverty, particularly for people with diabetes and related chronic conditions. Here you will be offered presentations on clinical, public policy and management topics that impact quality improvement and health disparities in primary care settings. The conference is jointly hosted by Minnesota Association of Community Health Centers, Minnesota Department of Health, and Neighborhood HealthCare Network.

This year's clinical theme is the *Prevention & Treatment of Diabetes at the Community Level*. Sessions will explore how diabetes models can be applied to support patient self-management; chronic disease prevention; the inter-relatedness of diabetes, cardiovascular disease and sleep apnea; and nutritional, physical, and other interventions for patients. Speakers are experienced in serving populations who face significant health disparities and are at high risk for complications of diabetes and other chronic conditions, such as American Indians, Latinos, recent immigrants, the elderly, and low income people of every ethnic/racial group. Many of the speakers are drawn from community health settings.

### About Our Clinical Theme

Diabetes mellitus shows no sign of abating. According to the CDC, 8 percent of Americans (24 million people) have diabetes, an increase of about 3 million over two years. About 57 million people have pre-diabetes. That means that nearly **1 in 4 people** in Minnesota and the rest of the country have diabetes or are at very high risk for the disease.

While the quality of diabetes care has progressed over the years, there is ample room for improvement. The range of scores for Minnesota's quality indicator "The D5" – a combined measure of five essential diabetes treatment goals having been met by clinic patients – ranges from a high of 48% to a low of 0% (<http://theD5.org/>). Recognizing best practices through measures such as the D5 will help drive further improvements in Minnesota's provider community.

The D5's cardiovascular and glycemic control goals are only a piece of the complex care considerations required to manage diabetes. Look for sessions highlighting the relationship between diabetes and such diverse topics as sleep apnea, smoking, medications and vitamin D levels. Data such as this can also help us understand the nature of health disparities in Minnesota, as seen in the recent Health Care Disparities Report (<http://www.mnhealthcare.org/HCD/>).

High quality diabetes care also depends on primary care clinics having an effective infrastructure. The conference's financial and administrative sessions cover issues essential to clinic operations, such as information systems, workforce issues and compensation.

### Health Disparities an Underlying Theme

Health care disparities are "large and growing" according to government reports. Disparities in life expectancy between rich and poor Americans parallel the growth of income inequality over the last 20 years. These ominous trends hold for infant mortality and for death from heart disease (including diabetes-related heart disease) and certain cancers. Inequities in life expectancy are seen at birth and at every age.

Studies are now revealing underlying causes of diabetes health disparities that reach beyond low socioeconomic status. These include:

- Genetic risk factors for chronic diseases are higher for some ethnic groups
- Access to health insurance, medical advances & intensive treatment is income dependant
- Smoking prevalence is higher among those with lower income and education levels
- Unsafe environments in low-income neighborhoods contribute to unhealthy behaviors
- The gap in health literacy by income and education is growing
- Racial discrimination by health professionals persists, though often untended
- Chronic stress, a damaging by-product of low socioeconomic status and discrimination, triggers physiological changes that contribute to chronic disease.

Significant disparities are seen with diabetes as well. Studies indicate that **10 percent of racial differences in mortality have been attributed to diabetes.**

This year you will also hear from patients and community members about their challenges and insights from multicultural perspectives. Thursday's lunch keynote speakers will use traditional Anishanabe storytelling to describe the humor and pathos of their experience with diabetes. The enlightening post-conference workshop will feature members of five ethnic communities sharing their cultural values and practices regarding end-of-life care.

### **On Health Care Reform in 2008**

The conference again highlights Minnesota health care reform issues. Get a better picture of current reform activities and their potential impact with the plenary on Medical Home and the sessions "Minnesota Health Care Reform: Nuts & Bolts" and "Legislative and Policy Update."

### **Apply What You Learn**

One of the goals of the Many Faces conference is to share practical tools, tips and resources and offer useful information, inspiration and networking opportunities to help you put what you have learned into practice. We additionally provide speaker handouts plus an extensive bibliography and resource list on health disparities and many of the other session topics on the conference website. Check back later this fall on the website [www.manyfacesconference.org](http://www.manyfacesconference.org) to download these valuable tools.

### **Save the Date**

Plan to join us for the **2009 Many Faces of Community Health Conference**

October 29-30, 2009.

Watch our website for more information –

[www.manyfacesconference.org](http://www.manyfacesconference.org)

## Overall Conference OBJECTIVES

With this year's theme, "*Prevention & Treatment of Diabetes at the Community Level*," Many Faces of Community Health focuses on improving health and reducing health disparities in underserved populations and among those living in poverty, particularly for people with diabetes and related chronic conditions. Content is designed to provide practical and effective tools and strategies for improving community-based primary care and reducing health disparities. Sessions will explore how diabetes models can be applied to support patient self-management; chronic disease prevention; the inter-relatedness of diabetes, cardiovascular disease and sleep apnea; and nutritional, physical, and other interventions.

Experience a variety of learning techniques and collect useful tools, tips and resources. Enjoy networking and view informative community and industry exhibits. Hear thought-provoking and practical ideas and gain renewed inspiration to meet workplace challenges.

Upon completion of this conference, participants will be able to:

- Describe care models for community engagement that support chronic disease management.
- Define how diabetes & other chronic conditions (e.g., cardiovascular disease, sleep apnea) are interrelated.
- Apply culturally appropriate interventions for patients with chronic conditions.

There will also be policy and administrative sessions whose participants will be able to:

- Describe new – and recycled – developments in health care reform
- Identify specific opportunities and requirements for Federally Qualified Health Centers

## Detailed Agenda

### Thursday, October 30, 2008

7:30–8:30am     **Registration/ Continental Breakfast/ Exhibit Set-up**

8:30–8:45am     **Welcome** **Park Ballroom**

*Rhonda Degelau, Executive Director, Minnesota Association of Community Health Centers (MNACHC), Minneapolis*

*Dr. Sanne Magnan, Commissioner, Minnesota Department of Health*

8:30–10:15am     **KEYNOTE ADDRESS:** **Park Ballroom**

“Engaging a Community in Chronic Disease Management”

*Joia Mukherjee, MD, MPH, Medical Director, Partners In Health*

Partners in Health (PIH) is an international medical non-governmental organization (NGO) with clinical programs and partnerships in areas as varied as Haiti, Rwanda, Peru, Russia, and inner-city Boston. It develops and carries out programmatic and clinical initiatives to provide health care, reduce health disparities and promote human rights through ongoing collaborations with community-based programs and local colleagues in these countries.

In her work with PIH, WHO and the Institute of Health & Social Justice, Dr. Mukherjee is recognized as a leader in the field of social medicine which seeks to 1) understand how social and economic conditions impact health, disease and the practice of medicine; and 2) foster conditions in which this understanding can lead to a healthier society. Her scholarly work focuses on the human rights aspects of HIV treatment and on the implementation of complex health interventions in resource-poor settings.

Dr. Mukherjee will bring insights to Many Faces participants that we can use working with our own resource-poor communities.

OBJECTIVES: Upon completion, participants will be able to:

- Describe how the management of chronic diseases is viewed in global health policies.
- Summarize how the treatment of complex diseases can be scaled up in impoverished communities.

10:15–10:45am **Break / Exhibits Open**  
*Refreshments served in Exhibit Hall*

**Terrace Ballroom**

10:45–12:00pm **CONCURRENT BREAKOUT SESSIONS I**

#### **A. Creating a Future Healthcare Workforce**

We will discuss the current state of Minnesota's primary care workforce, some reasons for the shortage, and some approaches the U of M Medical School is using to help create a more robust pipeline of future primary care clinicians. The presentation will bring together minority pre-med and medical students who have expressed an interest in serving within community clinics and underserved communities. Students and speakers will discuss realistic, long range strategies for creating a well-prepared, multicultural workforce.

*Kathleen Brooks, MD, Associate Dean for Primary Care, University of Minnesota Medical School*

*Jo Peterson, PhD, Executive Director, Minnesota Future Doctors*

*Pre-med Student panel: Azieeb Kidanu, Abdirahman Ikar, Thuy Nguyen-Tran*

OBJECTIVES: Upon completion, participants will be able to:

- Discuss current state of Minnesota's primary care workforce, reasons for the shortage, and approaches to developing more primary care clinicians.
- Summarize realistic, long range strategies for creating a well-prepared, multicultural primary care workforce.

#### **B. Cutting without Bleeding: Keeping Your CHC Going Strong**

Community clinics facing financial pressures often see staff cuts as the first and only option for improving the bottom line. But is it? Staff cuts can be damaging and counterproductive and, in many cases, should be considered a last resort. This session will address options for reducing operating expenses and increasing efficiency & productivity, without reducing capacity, in tough financial times.

*Michael R. Taylor, President, Precision Resources, Inc.*

OBJECTIVES: Upon completion, participants will be able to:

- Identify possible options when faced with the need to reduce operating expenses without reducing staff or service capacity.
- List possible outcomes when staff reductions are considered the only option.

### C. ICSI Guideline for Prevention of Chronic Disease

How can a primary care clinic effectively engage patients in making healthy lifestyle changes to prevent chronic disease? This ground-breaking guideline outlines evidence-based strategies and programs designed for integration into primary care settings to help adult patients increase physical activity, improve nutrition, decrease tobacco use and exposure, and decrease hazardous and harmful alcohol use.

*Thomas Kottke, MD MPH, HealthPartners Medical Group*

*Melissa Marshall, MBA, Institute for Clinical Systems Improvement*

OBJECTIVES: Upon completion, participants will be able to:

- Integrate 2 strategies into clinical practice for encouraging patients to select healthy lifestyle changes.
- Describe 3 evidence-based programs designed to prevent chronic diseases.

### D. Diabetes Care Coordination: Case Manager and CHW Model

West Side Community Health Center has developed a program using case managers and community health workers to help patients identify and resolve barriers to effective self-management of diabetes. After a year of program operation as part of Neighborhood Health Care Network's Care Coordination Project, exciting results are emerging. Hear about workflow and communications, barriers addressed and the clinical impact of this mentoring program on patients' lives.

*Mara Glantz, RN, West Side Community Health Center*

OBJECTIVES: Upon completion, participants will be able to:

- Explain the self-management approach in diabetes care coordination at a community health center.
- List 2 examples of how communication and workflow can resolve barriers to self-managing diabetes care.
- Discuss 2 benefits of having patients self-manage their chronic disease care.

12:00–12:50pm **Lunch**

*Join your colleagues for lunch and stimulating conversation!*

**Atrium**

1:00–1:45pm

**PLENARY: Diabetes - A Patient's Perspective**

*Raymond J. Earley and Cheryl Earley*

**Park 1 Ballroom**

Ray Earley has been a storyteller most of his life, born into his family tradition. He and his wife Cheryl are both Anishanabe, each linked to their ancestral histories: his is the Bear Clan of the Pillager Band of the White Earth Reservation and hers is the Bois Forte Nett Lake Band. Both were diagnosed with diabetes years ago and have many family members who also have diabetes. They have explored various medical and traditional approaches to caring for themselves and their families with this illness. They will share stories from their experiences that will offer insight on how health professionals can help patients take charge of their own health.

OBJECTIVES: Upon completion, participants will be able to:

- Describe 2 or more experiences our storyteller had that delayed or interfered with his diagnosis of diabetes.

- List 2 or more things that health care providers should know from the patient's perspective to improve their care of patients with diabetes.
- Describe what this patient feels has been most helpful in the care he received from his health care team.

1:45–2:00pm **Break / Exhibits Open**

**Terrace Ballroom**

2:00–3:15pm **CONCURRENT BREAKOUT SESSIONS II**

### **A. Legislative and Policy Update**

The Minnesota 2008 Legislative session began a new round of health care reform in Minnesota. In the 2009 session, legislators will consider further reform proposals and other important policy changes. This session will focus on the changes from the 2008 session and provide a preview of the 2009 session. The session will also focus on legislation affecting community clinics and what to expect beyond 2008.

*Jonathan Watson, Director of Public Policy, Minnesota Association of Community Health Centers  
Roger Schwartz, JD, Senior Director, State Affairs, National Assoc. of Community Health Centers, Washington, DC*

OBJECTIVES: Upon completion, participants will be able to:

- Discuss changes in the 2008 Legislative session that began a new round of health care reform.
- Review the changes predicted in health care reform during the 2009 Legislative session.

### **B. Incentive-Based Compensation, Part I**

Learn how to establish a framework for developing and monitoring an incentive-based program for your clinic, to help maximize the efficiency and effectiveness of health care team.

*Michael Holton, RSM McGladrey, Inc.*

OBJECTIVE: Upon completion, participants will be able to:

- Describe an incentive-based program you could establish in your clinic to reward both quality and productivity.

### **C. ICSI Guideline for Prevention of Chronic Disease (repeat of earlier session)**

How can a primary care clinic effectively engage patients in making healthy lifestyle changes to prevent chronic disease? This ground-breaking guideline outlines evidence-based strategies and programs designed for integration into primary care settings to help adult patients increase physical activity, improve nutrition, decrease tobacco use & exposure, and decrease hazardous and harmful alcohol use.

*Thomas Kottke, MD, MPH, HealthPartners Medical Group  
Melissa Marshall, MBA, Institute for Clinical Systems Improvement*

OBJECTIVES: Upon completion, participants will be able to:

- Integrate 2 strategies into clinical practice for encouraging patients to select healthy lifestyle changes.

- Describe 3 evidence-based programs designed to prevent chronic diseases.

**D. Getting Behind the Smoke Screen:  
One Clinic’s Successful Tobacco Cessation Program**

For decades providers have advised patients to quit using tobacco with little success. Hear how one tobacco cessation program is making a difference in patients being able to kick the nicotine habit. Learn how the Community-University Health Care Center’s tobacco program works - both the workflow that supports it and the results it has generated.

*Christina Cipolle, PharmD, Community-University Health Care Center, Minneapolis*

OBJECTIVES: Upon completion, participants will be able to:

- Describe steps involved in the tobacco cessation program presented.
- Discuss what data is collected to evaluate program results.
- Identify 1 activity described in this tobacco cessation program you will try in your clinic’s tobacco cessation program.

3:15–3:45pm **Break / Exhibits Open** **Terrace Ballroom**  
*Refreshments served in Exhibit Hall*

3:45–5:00pm **CONCURRENT BREAKOUT SESSIONS III**

**A. Opportunities under the New Safe Harbor Rule**

Now that the HHS Office of Inspector General has issued the long-awaited federal anti-kickback Safe Harbor Rule for Section 330 grantees, FQHCs have a great opportunity to increase services through the receipt of grants, services, gifts, discounts, and other benefits from health care providers (such as hospitals). This session will review the critical elements of this rule and provide direction on how to meet the legal requirements for leveraging new resources and expanding collaborative opportunities.

*Roger Schwartz, JD, Senior Director, State Affairs, National Assoc. of Community Health Centers, Washington, DC*

OBJECTIVES: Upon completion, participants will be able to:

- Review the critical elements of the federal anti-kickback Safe Harbor Rule for PHS 330 grantees.
- List the legal requirements that open the door to work with new resources and expand collaborative opportunities.

**B. Incentive-Based Compensation, Part II** *(Continuation of Part 1)*

Learn how to establish a framework for developing and monitoring an incentive-based program for your clinic, to help maximize the efficiency and effectiveness of health care team.

*Michael Holton, RSM McGladrey, Inc.*

OBJECTIVE: Upon completion, participants will be able to:

- Describe an incentive-based program you could establish in your clinic to reward both quality and productivity.

### **C. Is Vitamin D the New Silver Bullet for Preventing and Managing Chronic Disease?**

We are bombarded in both the professional literature and the news media with the latest research into Vitamin D's relationship to just about everything and particularly chronic conditions. In this session we will look at what is behind all the "new" information about calcium and Vitamin D and sort out currently useful information for your patients and what to watch for in the future.

*Pamela Van Zyl York, MPH, PhD, RD, LN, Minnesota Department of Health*

OBJECTIVES: Upon completion, participants will be able to:

- Translate how the "new" information about Vitamin D and calcium fits into chronic disease care.
- Compare how past information about Vitamin D and calcium relates to the new findings.
- Describe how you will integrate current Vitamin D information into your own health care plan and into your patient education messages.

### **D. Translating Diabetes Medications into Protocol**

Diabetes medications come with the usual array of pros and cons, in terms of both side effect profiles and financial considerations. Hear a review of oral diabetes medications, the International Diabetes Center's approach to managing diabetes, and how NorthPoint Health and Wellness Center has incorporated these into its diabetes treatment protocol.

*Kate Pyzdrowski, MD, NorthPoint Health & Wellness Center*

*Richard Bergenstal, MD, International Diabetes Center, Park Nicollet Clinic*

OBJECTIVES: Upon completion, participants will be able to:

- Explain the benefits of current oral medications in the treatment of diabetes.
- Discuss the International Diabetes Center's (IDC) approach to managing diabetes.
- Describe the process NorthPoint Health & Wellness Center used to integrate IDC's approach to diabetes management into its usual diabetes care.

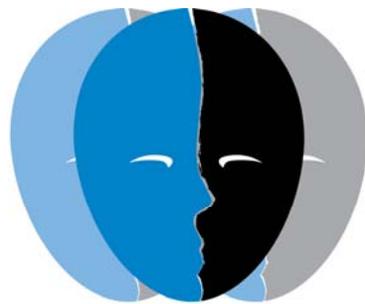
5:00–7:00pm

### **Evening Reception**

*Music with the Isaac Zuckerman Combo*

*Refreshments & Cash bar*

**Atrium**



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## Friday, October 31, 2008

8:00–8:45am **Welcome and Awards** **Park 1 Ballroom**  
*Walter Cooney, Executive Director, Neighborhood Health Care Network, St. Paul*

**2008 Bruce Zimmerman Diabetes Award: Richard Bergenstal, MD**  
*Minnesota Diabetes Steering Committee*

**MNACHC 2008 State Legislator Award: Representative Paul Thissen**  
*Jonathan Watson, MNACHC*

8:45–10:15am **PLENARY: “Medical Home: Old Paradigms/New Direction”**

*Moderator: Gary Oftedahl, MD, Medical Director, Institute for Clinical Systems Improvement,  
Jeff Schiff, MD, Medical Director of Minnesota Health Care Programs, Minnesota Department of  
Human Services*

The topic of “medical home” has burst into animated discussion, enhanced by recent legislative action in Minnesota. Initial enthusiasm for what seems like a way to address the changes necessary in health care is often replaced by confusion over the many facets layered onto this concept. This session will explore the present medical home/health care home activity in Minnesota, hoping to clarify opportunities for moving toward a patient-centered, value-driven health care system.

OBJECTIVES: Upon completion, participants will be able to:

- Summarize 2 key components in a patient-centered, value-driven health care system.
- Give 2 examples of barriers to developing the medical home concept.
- List any key components of the medical home already being practiced in your clinic.
- Review how the medical home concept is addressed in recent MN legislative action.

10:15–10:45am **Break / Exhibits Open** **Terrace Ballroom**  
*Refreshments served in Exhibit Hall*

10:45–12:00pm **CONCURRENT BREAKOUT SESSIONS IV**

### **A. Minnesota Health Care Reform:**

#### **Nuts & Bolts for FQHCs on Structuring & Paying for Care Coordination**

As health care reform efforts move forward in Minnesota, the emphasis is on effective care coordination as a strategy for managing chronic disease. Whether using Community Health Workers, establishing a coordinated care network, or becoming a medical home, there are operational and financial considerations for FQHCs that must be addressed. Hear the latest on where we are in Minnesota in terms of the nuts and bolts of structuring and paying for care coordination.

*Moderator: Michael Scandrett, JD, Director of Health Policy, Halleland Health Consulting,  
Minneapolis*

*Pat Adams, MPH, Assistant Commissioner of Health, Minnesota Department of Health*

*Alison Johnson, BSN, MBA, Director of Clinical Consulting for Halleland Health Consulting*

*Karen Peed, Minnesota Department of Human Services*

*Jonathan Watson, Director of Public Policy, Minnesota Association of Community Health Centers*

OBJECTIVES: Upon completion, participants will be able to:

- Describe 2 structures of care coordination as a strategy for managing chronic disease.
- Discuss various methods of reimbursement for payment for care coordination.

### **B. The Agony and Ecstasy of EHR Implementation**

Implementing an electronic health record (EHR) system is a daunting task. The first part of this session outlines some of the issues clinics should consider during the planning phase. Issues include physical space and layout for equipment, conversion process from paper to electronic, staff training and total project cost. The second part of the session will draw upon the experiences of a clinic that has implemented an EHR. Gain knowledge about “what worked well” and “what they would have done differently.”

*Robert E. Thompson, Consultant, Minnesota*

*Brian J. Bergs, Finance Director, NorthPoint Health & Wellness Center, Minneapolis*

OBJECTIVES: Upon completion, participants will be able to:

- List three issues clinics need to consider when planning to implement an EHR.
- Describe one clinic’s experiences in implementing its EHR: what went well and what they would have done differently.
- If your clinic has implemented an EHR, match your clinic’s experiences with those of the clinic presented in this session.

### **C. The Relationship of Sleep Apnea to Diabetes and CVD**

How does sleep apnea contribute to the risk of developing diabetes and cardiovascular disease, as well as increase the likelihood of poor outcomes with these diseases?

Recognition and treatment of sleep disorders can improve management of chronic conditions. Learn how to counsel patients on sleep hygiene and normal sleep, sleep deprivation and its impact on health.

*Colleen Bazargani, CRT RPSGT, Park Nicollet / Methodist Hospital Sleep Disorder Clinic*

OBJECTIVES: Upon completion, participants will be able to:

- Identify main elements of sleep hygiene and how normal and healthy sleep improves the self-management of chronic diseases.
- Explain 2 sleep disorders and how these impact people with chronic diseases.
- Describe how you can incorporate assessment of sleep hygiene into discussions with your patients.

### **D. Reaching Across the Pharmacy Continuum**

HRSA’s new Patient Safety and Pharmacy Collaborative brings together organizations that mutually care for a population of vulnerable or underserved people, combining Community Health Centers with Disproportionate Share Hospitals or Rural Health Clinics with Critical Access Hospitals. The resulting teams are creating workflows to resolve medication reconciliation issues across the healthcare continuum and are partnering to increase medication management through inter-professional team collaboration. Get an introduction to pharmacy integration best practices and hear about progress Minnesota teams are making.

*Todd Sorensen, PharmD, University of Minnesota School of Pharmacy*

*Haley S. Halton, PharmD, Hennepin County Medical Center, Minneapolis*

*May Xia Lo, PharmD, Westside Community Health Services, St. Paul*

*Steven Vincent, MD, Medical Director, People’s Center Medical Clinic, Minneapolis*

OBJECTIVES: Upon completion, participants will be able to:

- Discuss why HRSA brought together a Patient Safety and Pharmacy Collaborative.
- Describe 2 ways to improve medication management handoffs between your clinic and the inpatient/ER setting.
- Identify 1 way to increase medication reconciliation in your clinic practice.

12:00– 12:15pm **Box Lunch Pick Up/ Final Exhibit Viewing** **Terrace Ballroom**

12:15–2:15pm **WORKSHOP: “Cultural Perspectives on End of Life Care”** **Park 1 Ballroom**

*Moderator John Song, MD, Assistant Professor, University of Minnesota Center for Bioethics*

*Lori Banaszak, MD, Native American Community Clinic, Minneapolis*

*Saeed Fabia, EdD, Executive Director, Confederation of Somali Community of Minnesota*

*Clarence Jones, Q Health Services/ Southside Community Health Services, Minneapolis*

*Kelly Milam, Minnesota Department of Health, St. Paul*

*Joe Sierra, MD, Hennepin County Health Care for the Homeless, Minneapolis*

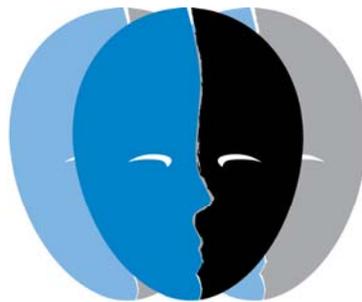
*Deu Yang, UCare*

How people approach medical care at the end of life can be an underlying factor in how decisions around managing chronic disease are made. Providers who wish to discuss advanced directive issues with patients can encounter cultural barriers unless they have knowledge of cultural values and practices that influence their patients’ decisions and communication styles.

Dr. Song will engage panelists from several cultural communities in Minnesota in a discussion of different approaches to end-of-life-care. As faculty advisor for Phillips Neighborhood Clinic, Dr. Song has worked with homeless patients on advance directives and other aspects of end-of-life care.

OBJECTIVES: Upon completion, participants will be able to:

- Discuss potential areas of provider-patient misunderstandings in end-of-life care.
- Describe how understanding of cultural values and practices can be incorporated into management of end-stage chronic disease.
- List one consideration you have learned for each of the cultures represented on the panel.



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## **SPEAKERS**

### **KEYNOTE:**

#### **Joia Mukherjee, MD, MPH: Keynote Presenter – Engaging a Community in Chronic Disease Management**

Joia Mukherjee, a 1992 graduate of the University of Minnesota Medical School, trained in infectious disease, internal medicine, and pediatrics at the Massachusetts General Hospital and has an MPH from the Harvard School of Public Health. She is an Assistant Professor in the Division of Global Health Equity at the Brigham and Women's Hospital and the Department of Social Medicine at Harvard Medical School where she teaches medical students, residents and fellows in the fields of infectious disease, global health, human rights and health disparities. Since 2000, Dr. Mukherjee has served as the Medical Director of Partners In Health, (<http://www.pih.org/>) an international medical charity with clinical programs and partnerships in Haiti, Rwanda, Lesotho, Malawi, Burundi, Peru, Mexico, Russia, and inner-city Boston. In this capacity she is involved in programmatic and clinical work to provide health care, reduce health disparities and promote human rights by developing public sector, and community based programs with local colleagues in those countries.

Dr. Mukherjee consults for the World Health Organization on the treatment of infectious diseases in developing countries and is a member of the Executive Board of Health Action AIDS, a campaign conducted with Physicians for Human Rights for international advocacy and education to stop the global AIDS pandemic. Since 2005, Dr Mukherjee has also served as the Director of the Institute for Health and Social Justice, the policy and advocacy arm of Partners In Health.

As a physician and activist, Dr. Mukherjee is a respected voice in global health policy, a sought-after teacher and speaker at a wide range of venues around the world, having lectured at universities and major medical conferences in 14 countries. An extensively published and well respected researcher, she is currently principal investigator on three studies examining aspects of her work in Haiti. Incorporating what she has learned working with under-resourced agencies in impoverished communities, Dr. Mukherjee will speak on "Engaging a Community in Disease Management."

#### **Patricia Adams, MPH: Panelist – Medical Home: Old Paradigms / New Direction**

Pat Adams is the Assistant Commissioner of Health for the Minnesota Department of Health. In this role she leads the Family and Community Health Promotion Bureau, which includes maternal and child health services, health promotion and chronic disease prevention, and minority and multicultural health. As a result of the 2008 Minnesota Health Care Reform legislation, the Bureau now holds responsibility for the State Health Improvement Program (SHIP) and chronic disease management via the Health Care Home model.

Ms. Adams has a Master of Public Health degree and a Bachelor of Arts degree in nursing. Most of her career has been spent in leadership roles in local public health agencies, including rural, urban and suburban county health departments. Prior to her position at the Minnesota Department of Health, Ms. Adams was the Public Health Director for Dakota County's Public Health Department. She brings public health perspectives and passion to the health care reform activities, strongly supporting the concept of patient-centered care within the context of that person's family, their community and the broader support and service systems.

### **Lori Banaszak, MD: Panelist – Cultural Perspectives on End of Life Care**

Lori Banaszak is a board certified family practice physician and an enrolled member of the Bois Forte Band of Ojibwe. She has practiced medicine at the Native American Community Clinic (NACC) in Minneapolis since 2003. Dr. Banaszak received her M.D. at the University of Minnesota and did her residency at Santa Monica Medical Center in California. Prior to her work at NACC, she practiced at the Minneapolis Indian Health Board and at West Metro Medical. While serving as Medical Officer with Indian Health Service, Wind River Service Unit, she received her National Board Training in July 2000. Dr. Banaszak is currently a member of Associations of American Indian Physicians and the Metropolitan Urban Directors Group. She also sits on the board of the Minneapolis American Indian Center.

### **Colleen Bazzani, CRTT, RPSGT: Presenter – The Relationship of Sleep Apnea to Diabetes & Cardiovascular Disease**

Colleen Bazzani is a sleep educator at Methodist Hospital/Park Nicollet Sleep Disorder Center. She worked at Methodist Hospital for 26 years initially as a Respiratory Therapist and then as a Sleep Technologist. She graduated from St. Catherine's as a Respiratory Therapist and became a Registered Sleep technologist in 1984. She authored a chapter in Fundamentals of Sleep Technology named "Enhancing Therapeutic Compliance." Ms. Bazzani has been a presenter on Sleep Disorders and education for 15 years for corporate and civic groups, high school health classes and various medical specialties.

### **Richard M. Bergenstal, MD: Co-presenter – Translating Diabetes Medications into Protocol**

Richard Bergenstal is an endocrinologist and Executive Director of the International Diabetes Center (IDC) at Park Nicollet. He is Clinical Professor in the Department of Medicine at the University of Minnesota and currently serves as Vice President, Science and Medicine of the American Diabetes Association (ADA). In 2007, Dr. Bergenstal was named the ADA's Outstanding Physician Clinician of the Year.

Dr. Bergenstal received his MD and endocrine training from the University of Chicago where he was an Assistant Professor of Medicine before joining the IDC in 1983. His clinical research has focused on glucose control and diabetes complications as a Principal Investigator of two NIH trials the Diabetes Control and Complications Trial (DCCT) in type 1 diabetes and the Action to Control Cardiovascular Risks in Diabetes (ACCORD) study in type 2 diabetes. Dr Bergenstal's clinical efforts have been directed toward improving systems of care for patients with diabetes by translating new research findings in to practice. He teaches nationally and internationally on the importance of patient-centered team care, has been listed in Best Doctors in America since it began in 1992, has published over 100 peer reviewed scientific articles on diabetes and has co-authored the best selling Betty Crocker Diabetes Cookbook.

### **Brian Bergs: Co-presenter – The Agony & Ecstasy of EHR Implementation**

Brian Bergs has served as the CFO for NorthPoint Health & Wellness Center in north Minneapolis since 2003. In this position he helped lead the successful 2008 implementation of the Epic EMR system. With over 25 years in healthcare administration, Mr. Bergs participated in many changes in the way clinics and hospitals deliver care. In 1985 he helped lead the effort to install one of the first detailed hospital cost accounting systems at Abbott-Northwestern Hospital. Mr. Bergs completed his undergraduate degree at Concordia College (Moorhead, Minnesota) and earned an MBA from the University of Minnesota, Carlson School of Management.

### **Kathleen Brooks, MD, MBA, MPA: Co-presenter – Creating a Healthcare Workforce**

Kathleen Brooks serves as the Associate Dean for Primary Care at the University of Minnesota Medical School. She is also the Director of the Rural Physician Associate Program at the Medical School and Assistant Professor in Department of Family Medicine and Community Health. Dr. Brooks received her undergraduate and medical degrees from the University of Minnesota, and completed her family medicine residency there. She has practiced family medicine in a number of different clinical settings in Minnesota including private practice, community health clinic, and staff model HMO settings. She completed an MBA in Medical Group Management at the University of St. Thomas in St. Paul, Minnesota and then completed a master of public administration degree at Harvard University's Kennedy School of Government, focusing her studies on federal health policy.

Dr. Brooks has provided administrative consulting for health systems and health policy consulting for the Minnesota Medical Assistance Program. She served as the Minnesota Carrier Medical Director for the Medicare Part B program and serves on several statewide health policy committees.

### **Christina Cipolle, PharmD: Presenter – Getting Behind the Smoke Screen: One Clinic's Successful Tobacco Cessation Program**

Christina Cipolle directs pharmacy services at Community-University Health Care Center in Minneapolis. She provides comprehensive medication therapy management services and works to improve patients' medication access. Dr. Cipolle received the President's Student Leadership and Service Award in 2006, presented to 0.5 percent of the student body at the University of Minnesota for exceptional leadership and service to the University and surrounding community. This award honored Cipolle's volunteer work at the Phillips Neighborhood Clinic as a pharmacy student.

### **Raymond J. and Cheryl Earley: Plenary Presenters – Diabetes: A Patient's Perspective**

Ray and Cheryl Earley are both Anishanabe Chippewa. He is of the Bear Clan of the Pillager Band of the White Earth Reservation and is a storyteller through the traditions of his family. She is of the Bois Forte Nett Lake Band. Both have diabetes, as do many of their family members. They have explored various medical and traditional approaches to caring for themselves with this illness. Mr. Earley spent 4 years as a US Marine and is a Vietnam veteran. Until he retired, he worked for many years with veterans who are homeless, alcoholic, and drug addicted in such settings as the VA Hospital, prisons and rehab centers. Ms. Earley has worked in Education, Human Services, and Social Services for over 30 years. She has served as an educational aide in the schools and worked in adolescent and women's treatment centers with women and children dealing with chemical and mental health issues. She is currently enrolled in college, getting a human services degree as a role model and example for her children and grandchildren. Together, the Earleys have raised 11 children: 5 sons, 1 daughter and 5 foster children. They live in Mazeppa, Minnesota.

### **Saeed Fahia, EdD: Panelist – Cultural Perspectives on End of Life Care**

Saeed Fahia is the Executive Director of the Confederation of Somali Community of Minnesota (CSCM), the Twin Cities-based organization founded in 1994 by Somali community leaders to enhance the lives of Somalis in Minnesota by delivering advocacy services, working to unite groups in the state, preserving Somali traditions and culture and educating the community at large about Somali people. As ED, Dr. Fahia creates and oversees programs to assist East Africans in resettling in Minnesota and integrating into American life. Prior to this, Dr. Fahia was Associate Dean at Somali National University from 1981 to 1987. He has a doctorate in education from the University of Massachusetts and a master's of science from Eastern Michigan University. He received his Bachelor of Science degree from Somali National University.

### **Mara Glantz, RN, BA, BSN: Presenter – Diabetes Care Coordination: Case Manager & CHW Model**

Mara Glantz has a BA in Spanish from the University of Wisconsin and has worked in a free medical clinic in San Francisco, California. She received her BSN from University of Rochester in Rochester, New York.

Ms. Glantz has traveled and lived in Costa Rica, attended Universidad of Ncional, studied at La Universidad de España, and taught as a volunteer English teacher. Currently, she is working at West Side Community Health Center as a nurse and diabetes care coordinator. Ms. Glantz began working with the Diabetes Health Disparities Collaborative at West Side and has been coordinating diabetes care there for 2 years. She is also currently attending University of Wisconsin (final year!) and plans to graduate in May of 2009 with a master's of science degree as a Family Nurse Practitioner.

### **Haley S. Holtan, PharmD: Co-presenter – Reaching Across the Pharmacy Continuum**

Haley Holtan is a 2006 Graduate of the University of Minnesota College of Pharmacy. She completed her residency program at Hennepin County Medical Center (HCMC) in 2007. Dr. Holtan is currently working at HCMC as a clinical pharmacist in the Adult Medicine Clinic and practicing Medication Therapy Management (MTM).

### **Michael Holton: Presenter – Incentive-Based Compensation**

Mr. Holton's background involves 30 years in the community health center industry. His experience includes work in two community health centers, five years with the North Carolina Primary Care Association and nine years with the National Association of Community Health Centers as Director of Financial Management Assistance Services.

Mr. Holton and The Healthcare Services Group at RSM McGladrey work to assist community health centers in many areas, including:

- Accounting systems development
- Revenue maximization, reimbursement specialties
- Medicare and Medicaid cost report preparation
- Financial budgeting and cash flow projections
- Federal grants management
- Operational and readiness assessments and reviews
- Analyses of financial and operational data
- Project and program management
- Training of health center staff and Boards in all aspects of financial/operations management

### **Abdirahman Ikar: Panelist – Creating a Healthcare Workforce**

Abdirahman Ikar is a premed student of Somali background studying at the University of Minnesota. He is majoring in biology, society and environment and is participating in the Minnesota Future Doctors Program at the University Medical School and also at the Mayo Medical School. He is additionally serving as a research associate with the Hennepin County Medical Center (HCMC) Emergency Medicine Department.

### **Alison Johnson, BSN, MBA: Panelist – Medical Home: Old Paradigms / New Direction**

Alison Johnson is Director of Clinical Consulting for Halleland Health Consulting. She brings more than 30 years of experience in operations, management and analysis within the health care industry. Her credentials include 16 years as a nurse and hospital nursing administrator, 10 years in health plan management and seven years in health care management consulting. Previously, Ms. Johnson worked for Milliman, Inc. where she served as a health care management consultant and started the Minneapolis

offices' clinical practice. As director of population risk management for Fairview Healthcare System, she developed system wide strategies for care and cost management across a large integrated health care system serving 1.2 million people. She also worked almost 20 years in a variety of hospital-based nursing positions.

Ms. Johnson is a graduate of Western Washington University (MBA), University of Washington (BS Nursing) and St. Luke's Hospital School of Nursing. She has published numerous journal articles and presented at health care conferences. She has spent 25 years as a community volunteer in health care, school districts, and arts and music causes, currently serves as board chair for the Banyan Community Foundation, and has served on numerous other community health and housing program boards.

### **Clarence Jones, M.Ed.: Panelist – Cultural Perspectives on End of Life Care**

Clarence Jones is Outreach Director for Q Health Services / Southside Community Health Services. He received his undergraduate and master's degrees from Concordia University in St. Paul. For the last five years his work has included participation in research to increase the rate of organ and tissue donation within the African American community, in partnership with LifeSource, the organ donation and tissue procurement organization in Minnesota. Through this work he has helped raise the organ donation consent rate from 29% in 2004 to 75% in 2006. A current organ donation project utilizes training in Motivational Interviewing techniques for African American barbers to help them explore customers' attitudes and acceptance of organ donation. Mr. Jones has co-authored a book titled *Black Fathers: An Invisible Presence in America* and currently hosts a radio program on KMOJ Radio on Monday nights titled "Community Health Dialogue."

### **Azieb Kidanu: Panelist – Creating a Healthcare Workforce**

Azieb Kidanu is a senior Biology student at the College of St. Catherine, and will be completing her bachelor's degree May of 2009. Azieb's family is from Ethiopia, but she was born in the Sudan and moved to Minnesota as an infant. She is a participant of the first cohort of the Minnesota's Future Doctors Program, a pipeline pre-med program through the University of Minnesota and Mayo Medical School. Upon graduation, Azieb hopes to obtain a fellowship in public health and work as a community advocate for underserved populations. She plans to apply to medical school in next year and hopes to work as a primary care physician.

### **Thomas E. Kottke, MD, MSPH: Co-presenter – ICSI Guideline for Prevention of Chronic Disease**

Thomas E. Kottke is Medical Director for Evidence-Based Health at HealthPartners, Senior Clinical Investigator at HealthPartners Research Foundation, Professor of Medicine at the University of Minnesota, and a practicing cardiologist at Regions Hospital Heart Center in St. Paul, Minnesota. He is an internationally recognized expert in the delivery of preventive services and the prevention of chronic diseases and has published over 240 peer-reviewed papers, editorials and book chapters on these topics. While on the faculty of the Mayo Clinic School of Medicine, he developed 2 programs to improve breast and cervical cancer screening: the Southeastern Minnesota Women's Health Project in Southeastern Minnesota and the Native WEB for Native American women. Dr. Kottke has also launched trials to increase the delivery of smoking cessation services in medical practice (Doctors Helping Smokers) and increase preventive service delivery in primary care.

Dr. Kottke was a member of the first United States Preventive Services Task Force and AHRQ task forces for the development of smoking cessation intervention guidelines. He has served as a consultant to the World Health Organization (WHO) on prevention and management of chronic diseases and is a faculty member of the WHO Non-Communicable Disease Prevention School.

### **May Xia Lo, PharmD: Co-presenter – Reaching Across the Pharmacy Continuum**

May Xia Lo graduated in 2002 with her doctor of pharmacy degree from the University of North Carolina at Chapel Hill. She completed her pharmacy practice residency at the University of Minnesota in 2003. Dr. Lo has had extensive experience working with underserved patients through training and employment at three federally qualified health centers. She is currently the clinical pharmacist at the Westside Community Health Services East Side Family Clinic and leads their Patient Safety and Clinical Pharmacy collaborative.

### **Melissa Rudolph Marshall, MBA: Co-presenter – ICSI Guideline for Prevention of Chronic Disease**

Melissa Rudolph Marshall is currently a clinical systems improvement facilitator for the Institute for Clinical Systems Improvement (ICSI), with guideline topics around preventive and health maintenance. In addition to her guideline work, Melissa is part of the project team for High Technology Diagnostic Imaging and for Health Care Home.

Ms. Marshall holds a Masters of Business Administration from the University of St Thomas and Bachelors in Health Care and Long Term Care Administration from Concordia College. She has a background in nursing home administration, project management and health insurance. Ms. Marshall has been involved in quality improvement for the past twelve years.

### **Kelly Milam, Minnesota Department of Health: Panelist – Cultural Perspectives on End of Life Care**

Kelly Milam has been working in public health on prevention issues in the American Indian community for five years. He specifically focuses on indigenous tobacco control program development. Currently he works with the Minnesota Department of Health American Indian Tobacco Grants Initiative.

### **Thuy Nguyen-Tran: Panelist – Creating a Healthcare Workforce**

Thuy Nguyen-Tran is an undergraduate student at the University of Minnesota majoring in biochemistry and physiology. She is also a participant in the Minnesota Future Doctors Program and is serving as Secretary with the Minority Association of Pre-Medical Students, University of Minnesota chapter.

### **Gary Oftedahl, MD: Moderator – Medical Home: Old Paradigms / New Direction**

Gary Oftedahl is Chief Knowledge Officer for the Institute for Clinical Systems Improvement. He has served as Medical Director & Medical Director for Quality with Olmsted Medical Clinic, Medical Director of five long-term care facilities, board member for Blue Cross Blue Shield of Minnesota, Vice Chair of the Quality Council for Mayo's MMSI health plan, and President of the Zumbro Valley Medical Society.

Dr. Oftedahl has presented frequently on quality improvement methodology, adaptive leadership and the collaborative process. He most recently helped develop DIAMOND, a new way to deliver and pay for care for patients with depression in primary care settings. His impact on health care improvement earned him recognition as one of the 100 most influential health care leaders in 2008 by Minnesota Physician magazine.

### **Karen Peed, BA: Panelist – Minnesota Health Care Reform: Nuts & Bolts for FQHC's on Structuring & Paying for Care Coordination**

Karen Peed has been with the Department of Human Services since 1986. She is currently the Director for Managed Care Purchasing and Payment Policy in the Health Care Administration. She is responsible for health care purchasing thorough managed care arrangements for MinnesotaCare, Medical Assistance and General Assistance Medical Care, including several products designed to be integrated with Medicare. Minnesota currently enrolls approximately 440,000 people in managed care programs. In addition, she is

responsible for rate setting and payment policy for inpatient hospital services and other "safety net" providers. Prior to her work in the health care area, Ms. Peed worked in the areas of education and continuing care in both the public and private sectors,

### **Jo Peterson, PhD: Co-presenter – Creating a Healthcare Workforce**

Jo Peterson is the Director of Minnesota Future Doctors, a joint project developed as a collaboration between the University of Minnesota and Mayo Medical Schools. Minnesota Future Doctors aims to develop the skills of underrepresented pre-medical students to create a physician workforce representing Minnesota's diversity. Prior to this Dr. Peterson was a Dean of Academic Affairs at Minneapolis Community and Technical College.

### **Kate Pyzdrowski, MD, FACE: Co-presenter – Translating Diabetes Medications into Protocol**

Kate Pyzdrowski has been an endocrinologist at NorthPoint Health & Wellness Center since 2001, serving as Senior Leader for the diabetes Health Disparities Collaborative and the diabetes/chronic care community health worker program. Prior to this, Dr. Pyzdrowski was staff endocrinologist at Marshfield Clinic from 1993 to 2000. She completed a fellowship in Endocrinology and Metabolism and her residency training at the University of Minnesota Hospital and Clinic.

### **Michael D. Scandrett, JD: Moderator – Minnesota Health Care Reform: Nuts & Bolts for FQHC's on Structuring & Paying for Care Coordination**

Michael Scandrett is Health Policy Director for Halleland Health Consulting, Special Counsel with the law firm, and co-chair of the firm's health law practice. He concentrates his practice on health policy, strategic planning, regulatory compliance, and consulting support to health care organizations, nonprofits and governmental entities. He has been an advisor and policy analyst for 20 years and was influential in the formation of important public policies and reforms in Minnesota, including managed care regulation, MinnesotaCare, health care quality measurement and long-term care reimbursement policies.

Mr. Scandrett has helped organizations launch successful, innovative programs in community-wide quality measurement, managed care for persons with disabilities, health care for the uninsured and mental health system reform. He is often called upon to help fashion solutions to complex legal, policy, and regulatory challenges that are politically acceptable, administratively feasible, and can produce measurable results. His past roles include Executive Director of the Minnesota Council of Health Plans, Executive Director of the Minnesota Health Care Commission and legal counsel to the Minnesota Senate. He has served as a board member and officer of a number of Minnesota nonprofit health care organizations. He received his JD from the University of Minnesota Law School in 1982.

### **Jeff Schiff, MD, MBA: Panelist – Medical Home: Old Paradigms/New Direction**

Jeff Schiff has served as Medical Director of Minnesota Health Care Programs (MHCP - Medicaid, General Assistance Medical Care, Minnesota's SCHIP program and MinnesotaCare) at the Minnesota Department of Human Services since June 2006. His work focuses on the development and implementation of evidence based benefit policy for public programs and the advancement of improved care delivery models. Specific areas of interest include the development of policy to enhance primary care; the use of intrastate collaboration to improve quality; and the use of claims and clinical data to improve health outcomes. His division is currently implementing the Primary Care Coordination program enacted by the 2007 Minnesota

Legislature, which will bring the Medical Home concept, including a new payment mechanism, to individuals served by public programs.

Dr. Schiff has served as Minnesota Chapter president of the American Academy of Pediatrics and is active on the state leadership team for the Minnesota MCHB President's New Freedom Initiative Integrated Services Grant. In 2007 he received the Special Achievement Award of the American Academy of Pediatrics for leadership in this project. He has an MBA in health care administration from the University of St. Thomas; Dr. Schiff's clinical practice is pediatric emergency medicine.

### **Roger Schwartz, JD: Presenter – Legislative & Policy Update & Presenter – Opportunities Under the new Safe Harbor Rule**

Roger Schwartz is the Vice President of Executive Branch Liaison, and serves as Legislative Counsel to the National Association of Community Health Centers (NACHC). His responsibilities include drafting, reviewing, and analyzing federal legislation, reviewing and analyzing federal regulations and policies affecting health centers, and advising NACHC staff, primary care associations, and health centers on these issues. Prior to joining NACHC, Mr. Schwartz was a partner in the law firm of Feldesman, Tucker, Leifer, Fidell in Washington, DC.

### **Joe Sierra, MD: Panelist – Cultural Perspectives on End of Life Care**

Joe Sierra graduated from the University of New Mexico School of Medicine in 1979. He completed three years of a general surgery residency in Milwaukee in 1982 and completed family practice residency training at Hennepin County Medical Center (HCMC) in 1992. After residency, he joined the HCMC Department of Family Medicine as a faculty physician, dividing his time between patient care and teaching. His special interests include ambulatory surgery, urgent care, and health care for the homeless. He sees patients at the Family Medical Center in Minneapolis. Dr. Sierra is certified by the American Board of Family Practice and is an assistant professor of family practice and community health at the University of Minnesota School of Medicine.

### **John Song, MD, MPH, MAT: Moderator – Cultural Perspectives on End of Life Care**

John Song is an Assistant Professor in the Center for Bioethics and in the Department of Medicine at the University of Minnesota Medical School. He received his undergraduate degree in English and a Master's degree in teaching from Brown University, his MD from the University of Pennsylvania, and completed his residency in Internal Medicine at the University of Minnesota. He has completed a fellowship in General Internal Medicine at the Johns Hopkins School of Medicine and the Greenwall Fellowship in Ethics and Public Policy at Johns Hopkins and Georgetown Universities.

Dr. Song's current clinical activities for the Department of Medicine include inpatient attending. He is also the faculty advisor for the Phillips Neighborhood Clinic, an interprofessional, volunteer clinic serving homeless, uninsured, and undocumented individuals with the dual mission of community service and professional education. Dr. Song is the Director of Medical Ethics Education teaches bioethics in the Medical School and develops programs for students and residents. Dr. Song also has a curricular and research interest in bioethics education, especially in defining the objectives and goals of bioethics education for medical students. Other research interests focus on homeless persons and other underserved populations, end-of-life care, and medical professionalism.

### **Todd Sorensen, PharmD: Co-presenter – Reaching Across the Pharmacy Continuum**

Todd Sorensen is an Associate Professor and Associate Department Head at the College of Pharmacy, University of Minnesota. His academic work has focused on identifying mechanisms to increase access to affordable medications and the expertise of pharmacists in rural and urban underserved communities. Dr. Sorensen has worked with several initiatives sponsored by the Health Resources and Services Administration (HRSA) and currently serves as the Faculty Co-Chair for HRSA's Patient Safety and Clinical Pharmacy Services Collaborative.

### **Michael R. Taylor, BS: Presenter – Cutting Without Bleeding: Keeping Your Clinic Going Strong**

Michael Taylor is the President and founder of PreCision Resources, Inc. (PRI), a Wyncote, Pennsylvania health care consulting firm founded in 1994. Before that, he worked as a hospital administrator and then as a consultant with national health care consulting firms including The Lewin Group. He has provided consultative support to numerous health centers, other Health Resources and Services Administration (HRSA) grantees, health plans, integrated delivery systems, health care professional associations and government agencies for more than 25 years.

Mr. Taylor's work includes strategic, business and financial planning, operations improvement, board development, training and conflict resolution, financial management and third-party reimbursement counsel, and charge schedule development. He served as one of two curriculum developers and presenters for HRSA's Third-Party Reimbursement Program and has provided technical assistance to more than 100 HRSA grantees in more than 30 states. Mr. Taylor is retained by the National Association of Community Health Centers (NACHC) to assist in developing and presenting curriculum at NACHC's financial and operations management seminars and to serve as resource to health centers regarding financial, operations, reimbursement issues, and strategic planning. Mr. Taylor holds a BS degree in finance and accounting from Northeastern University.

### **Robert Thompson: Co-presenter – The Agony & Ecstasy of EHR Implementation**

Robert Thompson is the executive director of a Minneapolis NRP-funded neighborhood association and a former board member, chair and finance committee chair of a university-sponsored community health center. His experience includes working with a rural community health center in the poorest county in Iowa on development planning and community collaboration projects; working with a county-sponsored multi-services community clinic in business planning, dental services and clinic merger projects; organizing a walk-in clinic and shared practice management; and medical practice development services for private, hospital-affiliated primary care groups. Mr. Thompson additionally developed home-ownership grant program as part of hospital-funded neighborhood housing and redevelopment projects. He is a mentor in the Community Justice Program working with incarcerated individuals and a volunteer business advisor for Minneapolis-based Micro Grant project.

### **Pamela Van Zyl York, MPH, PhD, RD, LN: Presenter – Is Vitamin D the New Silver Bullet for Preventing & Managing Disease?**

Pam Van Zyl York has been involved in health promotion programs for more than 20 years. She has worked in local public health agencies, the Minnesota Department of Health (MDH) and has held faculty positions at the University of Minnesota and the College of St. Catherine. Dr. York currently works in the areas of prevention and management of chronic disease and healthy aging, and nutrition and physical activity programs at MDH and is Project Director for Minnesota's Arthritis Program. She received her PhD

and MPH from the University of Minnesota and her Bachelor's degree from Lawrence University. She serves on a variety of boards and committees, represents Minnesota nationally on the Women's Health Council, Osteoporosis Council, Arthritis Council and Aging Council of the National Association of Chronic Disease Programs, and is State Team Leader for Action for Healthy Kids Minnesota. Dr. York also holds a Certificate of Adult Weight Management from the Committee on Dietetic Registration and is a certified master trainer and program leader for the Arthritis Foundation Self-Management Program, the Arthritis Foundation Exercise Program, the Matter of Balance falls prevention program, and the Chronic Disease Self-Management Program (in Minnesota known as Living Well With Chronic Conditions).

### **Steve Vincent, MD: Co-presenter – Reaching Across the Pharmacy Continuum**

Steven Vincent is a Family Practitioner and Medical Director at the People's Center Medical Clinic in Minneapolis. He has been serving as a family practice physician in the Minneapolis area since 1981. He additionally has worked part time as an emergency department physician at Abbott-Northwestern Hospital for the past 25 years and has served as clinical instructor and preceptor for nearly as many years. Dr. Vincent received his MD at University of Michigan Medical School, and completed his University of Minnesota Affiliated Residency at Fairview-St. Mary's and Smiley's Point Clinic in Minneapolis. In 2002 he received a certificate if Mini-MBA in Health Care Management from St. Thomas University. He is a Diplomate of the American Board of Family Practice and an active member of the American Academy of Family Physicians.

### **Jonathan Watson, MPIA: Presenter – Legislative & Policy Update Panelist – Minnesota Health Care Reform: Nuts & Bolts for FQHC's on Structuring & Paying for Care Coordination**

Jonathan Watson has served as the Associate Director of the Minnesota Association of Community Health Centers (MNACHC) for twelve years. He is also MNACHC's Director of Public Policy. Previously he was a Medicaid budget and policy analyst with the State of Wisconsin's Department of Health and Family Services. He holds a BA degree in Economics from Saint Olaf College in Northfield, and a master's degree in international relations from the University of Pittsburgh.

### **Deu Yang: Panelist – Cultural Perspectives on End of Life Care**

Deu Yang was born in Laos and came to the US in one of the first waves of Hmong resettlement. Since then, she has helped Hmong individuals and their families throughout Minnesota access health services. She coordinated care for Hmong women and children for 12 years at Model Cities Health Center in Saint Paul, Minnesota. She has conducted prenatal Lamaze education classes in Hmong and was instrumental in introducing women to early prenatal care. At UCare, Ms. Yang serves as a clinical liaison and coordinates home and clinic-based care conferences for Hmong elders with chronic conditions. She initiated a Hmong elders program and was instrumental in increasing the ability of knowledgeable adult family members to serve as personal care assistants.

Ms. Yang has provided cross-cultural expertise for a number of health care studies involving Hmong patients and healers. She served as a cultural broker in a University of Minnesota study on dementia, and was a contributing author to a chapter on pregnancy complications in *Healing by Heart: Clinical and Ethical Case Stories of Hmong Families and Western Providers* (2003).

## Exhibitor List Goes Here

American Diabetes Association	Merck Vaccines
American Solutions for Business	Metropolitan Health Plan
BD Injectables	Minnesota AIDS Training & Education Center (MATEC – U of M)
Blue Cross & Blue Shield of Minnesota	Minnesota Area Health Education Center (AHEC)
Center for Leadership Education in Maternal & Child Public Health (U of M)	Minnesota Department of Health: Barr Library, Arthritis, Diabetes, Heart Disease & Stroke Prevention, Tobacco Prevention & Control
Cielo Solutions	Minnesota Department of Health – Office of Rural Health & Primary Care
Community University Health Care Center (CUHCC)	Minnesota International Health Volunteers
Council Connections	Minnesota Nurses Association
David Martin Agency, Inc.	Minnesota Visiting Nurse Agency
EckMaahs & Associates, LLC	NorthPoint Health & Wellness Center
EHS, Electronic Healthcare Systems, Inc.	Novartis
Fremont Community Health Services	Patient Tools
GE Healthcare	Portico Healthnet
GlaxoSmithKline Vaccine	Quest Diagnostics
Great Plains Telehealth Resource & Assistance Center	Southside Community Health Services
Growing Communities for Peace	Steps to a Healthier Minneapolis
Headwinds Solutions Minnesota	Stratis Health
Health Education for Life	Twin Cities Area Red Cross
Health Partners	UCare
Health Sciences Library – U of M	Value in Purchasing
Home Diagnostics	WIPFLi CPAs and Consultants
International Diabetes Center	
Medica Foundation	
Medicare Diabetes Screening Project	

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## Minnesota Association of Community Health Centers (MNACHC)



MNACHC is a nonprofit association of federally qualified health centers (FQHCs) and other safety-net providers located throughout Minnesota that provide comprehensive preventive and primary care services to all individuals, regardless of their ability to pay. Member clinics offer medical, dental, and mental health care to approximately 190,000 patients in urban, rural and tribal areas each year. The majority of patients served by these clinics are low income, uninsured, and medically underserved.

<http://www.mnachc.org/>

## Minnesota Diabetes Program (MDP) – Minnesota Department of Health



MDP is dedicated to improving the health of all people in Minnesota by reducing the impact of diabetes. To achieve this, the MDP works to attain population-wide impact by collecting and publicizing state diabetes data to guide policy and program design, convening forums and facilitating effective stakeholder partnerships, translating health research into practice, and promoting innovative, effective, and culturally appropriate improvement strategies.

<http://www.health.state.mn.us/diabetes/>

## Neighborhood Health Care Network (NHCN)



NHCN is a management services organization for community clinics in the Twin Cities metropolitan area. NHCN provides centralized business and administrative support to these member clinics. Community clinics provide high quality, accessible, affordable health care to primarily low-income and medically underserved populations. NHCN's mission is to strengthen the community clinics through integrated activities to improve the health of underserved communities.

<http://www.nhcn.org/>

The Many Faces of Community Health Conference is made possible, in part, through funding from the U.S. Department of Health and Human Services - Centers for Disease Control and Prevention (CDC) and the Bureau of Primary Health Care (BPHC) and the State of Minnesota.

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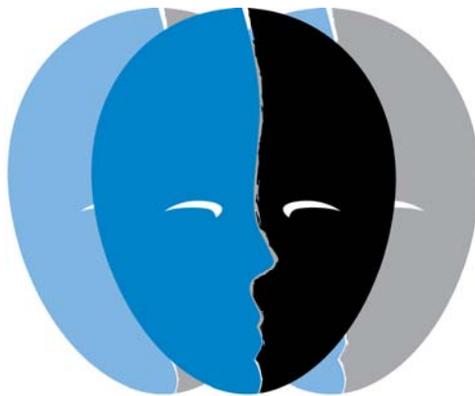
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