11th Annual Medical-Legal Partnership Summit

HEALTH IS A SHARED VALUE

April 6 - 8, 2016
Hyatt Regency Indianapolis
Indianapolis, Indiana

HOSTED BY

National Center for Medical Legal Partnership

Milken Institute School of Public Health
THE GEORGE WASHINGTON UNIVERSITY
MLP 101 Pre-Meeting: April 6, 2016

On Wednesday, a half-day Medical-Legal Partnership 101 Intensive pre-meeting will help ground individuals in the medical-legal partnership approach, and provide an introduction to more advanced topics on Thursday and Friday. Attendees will participate in three 90-minute workshops.

Everyone is welcome to attend Wednesday’s pre-meeting, but anyone who is new to medical-legal partnership or the MLP Summit is strongly encouraged to attend. This pre-meeting was designed specifically in response to feedback from participants who asked for additional introductory content.

The Wednesday pre-meeting agenda is on pages 7 - 8.

MLP Summit: April 7-8, 2016

The Summit will feature plenary sessions on medical-legal partnership financing, statewide growth strategies, and quality improvement measures. Workshops, affinity groups, and an accredited poster session will offer new research and practices related to the impact of integrating health and legal care for vulnerable individuals and families.

The Summit agenda and session descriptions are on pages 9-23.
Registration and Hotel Information

Location
Hyatt Regency Indianapolis
1 S Capitol Ave
Indianapolis, Indiana 46204

It will take 20 minutes by cab to get to the hotel from Indianapolis International Airport.

Hotel Accommodations
A block of King and Double guest rooms are reserved at the Hyatt at a special conference rate of $149 / night.

To book online: Visit the Hyatt’s special reservation website for the Summit: https://aws.passkey.com/event/14123690/owner/1663/home The discounted rate is automatically applied.

To book by phone: Call (888) 421-1442 and mention that you are part of the “Medical-Legal Partnership Conference.”

The special conference rate is available until Tuesday, March 15, 2016, or until the room block is full. Please note that our room block for previous conferences has sold out approximately three weeks prior to the Summit, so you are encouraged to book early.

Registration
To register, visit: http://www.bu.edu/cme/telegraph/public/ML-P16reg.html

<table>
<thead>
<tr>
<th>Tuition Type</th>
<th>Thursday / Friday ONLY</th>
<th>Wednesday / Thursday / Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student</td>
<td>$200</td>
<td>$275</td>
</tr>
<tr>
<td>Workshop presenter</td>
<td>$300</td>
<td>$375</td>
</tr>
<tr>
<td>Individual</td>
<td>$400 (before Feb 27) / $500 (after Feb 26)</td>
<td>$475 (before Feb 26) / $575 (after Feb 26)</td>
</tr>
</tbody>
</table>

*Learn more about eligibility for the student rate at: http://medical-legalpartnership.org/national-center/summit

The Indiana Health Advocacy Coalition is our partner in planning the 2016 Medical-Legal Partnership Summit. Their leadership helped bring the conference to Indianapolis.

The Summit is possible in part because of generous support from the Indianapolis community.

Community Health Network • Franciscan St. Francis Health • Indiana Legal Services, Inc. • Indiana University Health
Indianapolis Bar Association: Health Care and Life Sciences Section • Indiana University School of Medicine, Department of Pediatrics
Neighborhood Christian Legal Clinic • D. Wade Clapp and Nancy Swigonski
Keynote Speaker

Parveen Chand, MHA, FACHE
Chief Operating Officer
Eskenazi Health

Parveen Chand, MHA, FACHE, has served as the Chief Operating Officer of Eskenazi Health since July 2013. In this role, he has broad administrative responsibility for Operations including Radiology laboratory medicine, Rehabilitation services, Facilities, HR, Supply chain as well as Finance and Nursing.

He is a graduate of St. Louis University where he earned an undergraduate degree in biology and completed graduate studies in health administration at Washington University School of Medicine. He has been professionally involved in a number of community organizations including Kiwanis International, Horizon House and Greater St. Louis United Way.

Mr. Chand comes to Eskenazi Health with 20 years of progressive experience leading health care operations in academic, not-for-profit and for-profit, faith-based and large integrated system settings. Prior to joining Eskenazi Health, he served as COO at Creighton University Medical Center in Omaha, Nebraska. As a member of the senior leadership team he has executive responsibility for daily operations of one of the largest safety net providers in the nation.

Featured Plenary Speakers

James Corbett, MDiv, JD
Senior Vice President
Community Health and Values Integration
Centura Health

Mr. Corbett is Senior Vice President of Community Health and Values Integration at Centura Health, a multi-state integrated health system and the region’s largest health care provider serving Colorado and Kansas.

He was appointed a four year term to the National Institutes of Health’s National Advisory Council for Nursing Research by Health and Human Services Secretary Kathleen Sebelius.

Over the course of his career, Mr. Corbett has worked in four different health systems providing strategic and operational leadership for community health, behavioral health, ethics, research operations, spiritual care, diversity, mission and global health, and his expertise helped support health care reform in Massachusetts. In these roles, he established innovative programs such as community health advocates, behavioral health navigators, and hospital-housing partnerships to improve health care outcomes and reduce health care costs.

Mr. Corbett received his B.A. in International Relations from Syracuse University, a Juris Doctor from Saint John’s Law School, and a Master of Divinity from Duke University. He was a three-year fellow at Harvard Medical School, Division of Medical Ethics. He has taught health law and ethics at Maine and New England Schools of Law, and classes at Harvard School of Public Health and Harvard Medical School. James has been published in multiple journals and books on health reform and the role of public health and ethics in decreasing health care costs and improving population health outcomes.
Kristine Gonnella, MPH
Manager, Technical Assistance and Consultation
National Nursing Centers Consortium

Kristine Gonnella joined the National Nursing Centers Consortium (NNCC) in January 2014 as Manager of Technical Assistance and Consultation. She has a long history of working with community health centers from her time in Benin, West Africa as a Peace Corps Volunteer to her current position in supporting community health center programming under a HRSA National Cooperative Agreement.

Prior to her current position with NNCC, Ms. Gonnella worked to strengthen the public health infrastructure in Napa County, California. She developed and implemented emergency preparedness programs which engaged both the public health department and other community stakeholders to effectively address public health emergencies. In addition, she worked with senior administration at the CDC, California State Public Health Department and Santa Clara County, California to strengthen their Tuberculosis Control Program. Through these projects, Ms. Gonnella developed expertise engaging key stakeholders to work towards a common goal of strengthening the public health infrastructure and overcoming health disparities. Kristine is humbled to work among leaders in the Medical-Legal Partnership movement who tirelessly work towards improved access and care for the underserved at health centers across the country.

Patty Hebenstreit, JD
General Counsel
MDWise, Inc.

Patty Hebenstreit has a wealth of health law and legal related knowledge and experience and serves as General Counsel of MDwise, Inc.. Ms. Hebenstreit directs and coordinates MDwise’s efforts to ensure compliance with laws, regulations and policies that govern its Medicaid business. She is also responsible for directing government affairs, privacy and program integrity activities for MDwise.

Ms. Hebenstreit previously worked at the Health and Hospital Corporation of Marion County where she spent almost six years as Chief of Staff and two years as General Counsel. Prior to that, she spent time as the Director of Long Term Care at the Office of Medicaid Policy and Planning, and also as Director of the Medicaid Fraud Control Unit at the Indiana Attorney General’s Office.

Ms. Hebenstreit serves as the Vice President of the Board of Directors for Safe Sitter, Inc. and is the President of the Indianapolis Bar Association’s Health Care and Life Sciences Committee. Ms. Hebenstreit obtained her J.D. Degree from Indiana University School of Law Indianapolis, and her B.A. in Political Science from Marquette University.
Alison Paul, JD  
Executive Director  
Montana Legal Services Association

Alison Paul is the Executive Director of the Montana Legal Services Association in Helena, Montana. Prior to coming to Montana, Ms. Paul attended law school at the University of Kansas, where she was a member of the Law Review. Upon graduating from law school, she went into private practice in Chicago, Illinois, primarily advising tax-exempt organizations on tax and corporate issues. She joined the Montana Legal Services Association in 1998 as an attorney with its Domestic Violence Unit.

Ms. Paul is a member of the Montana Supreme Court Access to Justice Commission, and the current co-chair of the NLADA Technology Committee. She received the 2005 NLADA Innovations in Equal Justice Award for her innovative use of technology to serve MLSA's low income clients.

Andrew MacPherson  
Principal  
Healthsperien

As Principal at Healthsperien, Andrew MacPherson provides comprehensive strategic guidance, in-depth policy analysis, legislative strategy, and effective messaging development on wide-range of federal health policy and political issues, including those related to the implementation of Affordable Care Act (ACA), quality and value-based purchasing, Medicare, Medicaid, prescription drug coverage and pharmaceutical cost containment, long-term care supports and services, chronic care management, and public and private insurance coverage expansions. Through his work with dozens of public and private stakeholders at the local, state, regional and federal level, he has a special emphasis on policy and political issues related to advanced illness and end-of-life care.

Prior to his work at Healthsperien, Mr. MacPherson was Founder and Principal of MacPherson Strategic, Inc., a health care policy, legislative strategy, and communications consulting firm. He was also Director of Government Affairs at Jennings Policy Strategies, Inc., and he worked in the Government Relations Department with the American Psychiatric Association. Originally from Vermont, Mr. MacPherson received a B.A. in Political Science from The George Washington University in May 2005.
Dr. Patti Vanhook is the Associate Dean for Practice and Community Outreach for the East Tennessee State University College of Nursing and Associate Professor in the College of Nursing. In this role she is responsible for administrative operations of thirteen nurse-managed primary care and episodic care practices including FQHC, RHC, and school-based clinics. She continues to practice as a Board Certified Family Nurse Practitioner providing health care to the underserved and uninsured. She was inducted as a Fellow into the American Academy of Nursing in 2012.

The National Center for Medical-Legal Partnership (NCMLP) is the engine driving research and replication of medical-legal partnership across the United States. We work to: (1) Transform policy and practice across sectors; (2) Convene the field; (3) Build the evidence base; and (4) Catalyze investment. NCMLP is a project of the Milken Institute School of Public Health at the George Washington University. www.medical-legalpartnership.org
Participants will be divided into three pre-assigned groups. Name tags will have either a red, blue or green circle sticker on them, which correspond to group assignments. Throughout the day, groups will rotate through the three sessions below at different times. All groups will attend all three workshops.

12:30 p.m.  
Second Floor Foyer  
Registration & Boxed Lunch Pick-up

1 - 2:30 p.m.  
Break-out rooms  
**Session #1**

RED: “Basic Overview of MLP Metrics Activities: Defining Your Population/Clinical Setting and What You Need to Get Started”

BLUE: “Building Resources and Capacity for Medical-Legal Partnerships”

GREEN: “Understanding the Health Care, Public Health, and Legal Landscapes in your Community”

2:30 - 2:45 p.m.  
**Transition**

2:45 - 4:15 p.m.  
Break-out rooms  
**Session #2**

RED: “Understanding the Health Care, Public Health, and Legal Landscapes in your Community”

BLUE: “Basic Overview of MLP Metrics Activities: Defining Your Population/Clinical Setting and What You Need to Get Started”

GREEN: “Building Resources and Capacity for Medical-Legal Partnerships”

4:15 - 4:30 p.m.  
**Transition**

4:30 - 6 p.m.  
Break-out rooms  
**Session #3**

RED: “Building Resources and Capacity for Medical-Legal Partnerships”

BLUE: “Understanding the Health Care, Public Health, and Legal Landscapes in your Community”

GREEN: “Basic Overview of MLP Metrics Activities: Defining Your Population/Clinical Setting and What You Need to Get Started”

6 p.m.  
**Pre-meeting adjourns**
MLP 101 Session Descriptions

Understanding the Health Care, Public Health, and Legal Landscapes in your Community
Room: Regency C (Second Level)

Dennis Hsieh, MD, JD
Kate Marple, MS
Kristen Stoimenoff, MPH
Valerie Zolezzi-Wynndham, JD

This session will provide background on the health care, public health, and public interest legal sectors, highlight key resources for understanding the organizational capacity of each in participants’ communities, and discuss strategies for bridging sectors and building partnerships. This session will also examine how each of these sectors commonly message their work, the barriers those differences create, and ways to develop common language that advances the work of medical-legal partnership.

Building Resources and Capacity for Medical-Legal Partnerships
Room: Regency D (Second Level)

Ellen Lawton, JD
Ann Mangiameli, JD
Annette Quayle, MS

Anchored by the MLP Toolkit, this session will focus on how to start, grow, and strengthen a medical-legal partnership. This session will unpack the top resource strategies available to new and growing MLPs, and offer lessons from the field about different funding mechanisms and opportunities.

Basic Overview of MLP Metrics Activities: Defining Your Population/Clinical Setting and What You Need to Get Started
Room: Regency E/F (Second Level)

Mallory Curran, JD
Sharena Hagins, MPH
Kerry Rodabaugh, MD
Megan Sandel, MD, MPH

This session will orient participants to current research and evaluation activities at the National Center for Medical-Legal Partnership, and help them better understand the broader medical-legal partnership field. Participants will also be introduced to basic data collection practices that all new MLPs should engage in, and to research in their communities – such as Community Health Needs Assessments (CHNA) – that can help define target populations and advance the work of an MLP.
### Thursday, April 7 Agenda

*Attendees have the option to pre-register and get their conference programs on Wednesday evening from 7 - 8 p.m. in the Second Level Foyer.*

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 - 9 a.m.</td>
<td>Registration &amp; Breakfast</td>
</tr>
<tr>
<td></td>
<td>Second Level Foyer / Cosmopolitan Ballroom B</td>
</tr>
<tr>
<td>9 - 9:15 a.m.</td>
<td>Welcome &amp; Opening Remarks</td>
</tr>
<tr>
<td></td>
<td>Regency Ballroom A-D (Second Level)</td>
</tr>
<tr>
<td>9:15 - 10:15 a.m.</td>
<td>Keynote Address</td>
</tr>
<tr>
<td></td>
<td>Regency Ballroom A-D (Second Level)</td>
</tr>
<tr>
<td>9:15 - 10:15 a.m.</td>
<td>Keynote Address</td>
</tr>
<tr>
<td></td>
<td>Regency Ballroom A-D (Second Level)</td>
</tr>
<tr>
<td>10:15 - 10:30 a.m.</td>
<td>Communications Blitz:</td>
</tr>
<tr>
<td></td>
<td>“Spreading the MLP Vision Beyond the Innovators”</td>
</tr>
<tr>
<td></td>
<td>Regency Ballroom A-D (Second Level)</td>
</tr>
<tr>
<td>10:45 a.m. - 12 p.m.</td>
<td>Break-out Sessions 1-6</td>
</tr>
<tr>
<td></td>
<td>Break-out rooms</td>
</tr>
<tr>
<td>12 - 12:15 p.m.</td>
<td>Transition</td>
</tr>
<tr>
<td>12:15 - 1:30 p.m.</td>
<td>Lunch &amp; Affinity Groups</td>
</tr>
<tr>
<td></td>
<td>Cosmopolitan Ballroom B (Third Level) / Break-out rooms</td>
</tr>
<tr>
<td>Time</td>
<td>Event Description</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>1:30 - 1:45 p.m.</td>
<td>Transition</td>
</tr>
<tr>
<td>1:45 - 2:30 p.m.</td>
<td>Break-out Sessions 7-12</td>
</tr>
<tr>
<td></td>
<td>Session descriptions, presenters and room assignments are listed on pages 16-17.</td>
</tr>
<tr>
<td>2:30 - 2:45 p.m.</td>
<td>Transition</td>
</tr>
<tr>
<td>2:45 - 3:15 p.m.</td>
<td>Plenary 1: Building the Evidence Base for Medical-Legal Partnership</td>
</tr>
<tr>
<td></td>
<td>Marsha Regenstein, PhD</td>
</tr>
<tr>
<td></td>
<td>Professor, Health Policy and Management</td>
</tr>
<tr>
<td></td>
<td>Director of Research and Evaluation, National Center for Medical-Legal Partnership</td>
</tr>
<tr>
<td></td>
<td>The George Washington University</td>
</tr>
<tr>
<td></td>
<td>Over the past two years, the National Center for Medical-Legal Partnership has</td>
</tr>
<tr>
<td></td>
<td>developed a set of performance measures to assess the impact of the MLP approach.</td>
</tr>
<tr>
<td></td>
<td>The ultimate goal is to have MLPs across the country report on the same measures so</td>
</tr>
<tr>
<td></td>
<td>that we can understand and illustrate the collective impact of medical-legal</td>
</tr>
<tr>
<td></td>
<td>partnership in an evidence-based way. This session will introduce participants</td>
</tr>
<tr>
<td></td>
<td>through those seven measures related to patient, provider and financial impact,</td>
</tr>
<tr>
<td></td>
<td>and share the plan to collect pilot data over the next year with a funded, 12-site</td>
</tr>
<tr>
<td></td>
<td>pilot program. Data from the 2015 medical-legal partnership site survey will also</td>
</tr>
<tr>
<td></td>
<td>be shared, providing a current snapshot of the MLP field.</td>
</tr>
<tr>
<td>3:15 - 4 p.m.</td>
<td>Presentation of Medical-Legal Partnership Awards</td>
</tr>
<tr>
<td></td>
<td>Information about the awards and the award recipients will be printed in the on-</td>
</tr>
<tr>
<td></td>
<td>site program.</td>
</tr>
<tr>
<td>4 - 4:15 p.m.</td>
<td>Transition</td>
</tr>
<tr>
<td>4:15 p.m. - 5:30 p.m.</td>
<td>Break-out Sessions 13-18</td>
</tr>
<tr>
<td></td>
<td>Session descriptions, presenters and room assignments are listed on pages 18-19.</td>
</tr>
<tr>
<td>5:30 - 6:30 p.m.</td>
<td>Medical-Legal Partnership Poster Session (accredited)</td>
</tr>
<tr>
<td></td>
<td>Posters detailing original medical-legal partnership research will be on display,</td>
</tr>
<tr>
<td></td>
<td>and authors will be standing with posters to answer questions. Poster descriptions</td>
</tr>
<tr>
<td></td>
<td>will be included in the on-site program.</td>
</tr>
<tr>
<td>5:30 - 7 p.m.</td>
<td>Reception</td>
</tr>
</tbody>
</table>
7:30 - 8:30 a.m.  
Registration, Breakfast & Posters

Anyone wishing to receive the maximum continuing education credits for attending the conference MUST sign in at the registration desk in the Second Floor Foyer BOTH mornings. During breakfast, posters will be on display in the Third Floor Foyer, but not as part of an accredited session.

Optional networking groups will meet during breakfast. Descriptions and details are on page 23. Participants not wishing to participate in one of these groups can enjoy breakfast in Cosmopolitan A, B, & C/D.

8:30 - 9 a.m.  
Regency Ballroom A-D (Second Level)

2017 MLP Summit Announcement & 2018 MLP Summit Bid Process

9 - 10 a.m.  
Regency Ballroom A-D (Second Level)

Plenary 2: Advancing Financing of the MLP Approach

Parveen Chand, MHA, FACHE  
Chief Operating Officer  
Eskenazi Health

Patty Hebenstreit, JD  
General Counsel  
MDWise, Inc.

Andrew MacPherson  
Principal  
Healthsperien

Joel Teitelbaum, JD, LLM (moderator)  
Associate Professor, Health Policy and Management  
Co-Director, National Center for Medical-Legal Partnership  
George Washington University

The U.S. Health Resources and Services Administration has, over the past 18 months, demonstrated the impact that innovative public financing can have on the provision of medical-legal partnership services. After a brief opening presentation that will review HRSA’s approach and provide an update of other federal agencies’ forays into learning about and funding the MLP approach, participants in this Plenary will discuss their MLP work as it relates specifically to Medicaid-covered patient-clients, and their view as to how the Centers for Medicare and Medicaid (CMS) can serve as the next federal leader in financing the collaborative work carried out by MLPs in the field.

10 - 10:15 a.m.  
Transition
Participants will be pre-assigned a session. Name tags will have either a red, blue, silver, yellow or green star sticker on them, corresponding to room assignments.

Break-out Rooms

10:15 - 11:30 a.m.

**Break-out Session: Applying the Medical-Legal Partnership Approach to Population Health**

Five identical break-out sessions will run concurrently. Room assignments and presenter info will be included in the on-site program.

*Medical-legal partnerships have the opportunity to play an important role in the population health efforts that are increasingly at the center of hospitals and health centers’ approach to care. This session offers participants a primer on what population health is, how health systems are thinking about it, and how legal aid traditionally approaches justice at the population level. This session will review case examples that illustrate how medical-legal partnership can tackle specific population health issues. Through structured exercises, participants will learn how medical-legal partnerships can identify a hospital or health center’s “pain point”, opportunities for moving from patient to population work, what capacity MLPs need to do this work, and barriers to adapting these practices.*

11:30 - 11:45 a.m.

**Transition**

11:45 a.m. - 12:30 p.m.

Regency Ballroom A-D (Second Level)

**Plenary 3: Statewide and Sector Strategies for Growing MLP**

**Kristine Gonnella, MPH**
Manager, Technical Assistance and Consultation
National Nursing Centers Consortium

**Ellen Lawton, JD (Moderator)**
Co-Director, National Center for Medical-Legal Partnership
The George Washington University

**Bob Marsalli**
Executive Director
Montana Primary Care Association

**Alison Paul, JD**
Executive Director
Montana Legal Services Association

**Patti Vanhook, PhD, RN, FNP-BC, FAAN**
Associate Dean for Practice and Community Outreach
East Tennessee State University College of Nursing

*Healthcare organizations outnumber public legal organizations by a factor of 10:1 in many markets. As the number of MLPs continues to grow, statewide and sector approaches to coordinating health and legal resources are more important than ever – both for staying ahead of challenges of supply and demand, and for implementing the highest quality services. In over a dozen states, the federally-funded legal aid agency serves the entire state, making partnerships with state Primary Care Associations an efficient strategy to promote MLP growth and quality. At the same time, sectors within the health care field, such as nurse-led health centers, are poised to spark engagement both within the nursing profession and across multiple health settings, serving to unify MLP services and access, and build MLP capacity. This plenary session will focus on questions for local, state, and national health and legal organizations to consider as they grow and scale MLP.*
### Friday, April 8 Agenda (continued)

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>12:30 - 1:45 p.m.</strong></td>
<td><strong>Lunch</strong>&lt;br&gt;There are not any affinity groups during lunch on Friday. Everyone should convene in Cosmopolitan A, B, &amp; C/D for lunch.</td>
</tr>
<tr>
<td><strong>1:45 - 2 p.m.</strong></td>
<td><strong>Transition</strong>&lt;br&gt;<strong>Break-out Rooms</strong>&lt;br&gt;<strong>Break-out Sessions 19-24</strong>&lt;br&gt;Session descriptions, presenters and room assignments are listed on pages 20-21.</td>
</tr>
<tr>
<td><strong>3:15 p.m.</strong></td>
<td><strong>Meeting Adjourns</strong></td>
</tr>
</tbody>
</table>
B1: A New Approach to Treating the Invisible Wounds of War
Room: Vision (Third Level)

Carrie Chapman, JD (moderator)
Niranjan Karnikm, MD, PhD
Charles Small, LCSW, MSW
Erin Sutton, JD

The Road Home Program (RHP) of Rush University Medical Center is an interdisciplinary outpatient behavioral health treatment center designed to treat the invisible wounds of war—Post-Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), and Military Sexual Trauma (MST). RHP operates as a part of a national network of non-Veterans Health Administration (VHA) service providers created to respond to the national mental health crisis facing the country’s veterans. Dr. Karnik will speak about developing a coordinated health care team to treat PTSD, TBI, and MST, and RHP’s role nationally to respond to the gaps in service for Veteran’s behavioral health treatment. Erin Sutton will describe how RHP’s structure places the legal partner on the forefront of identifying the health-harming legal needs of veterans. Charles Small, will explain the clinical effects of using legal services to “treat” patients with PTSD, TBI, and MST from a social work perspective.

B2: The next evolution of MLP: The Public Health Nursing/Legal Partnership Model
Room: Regency E/F (Second Level)

Daniel Atkins, JD
Tamar Bauer, JD
Kay Kinsey, PhD, RN, FAAN
Vik Vishnubhakta, MPH, MBA

The PHNLP is a groundbreaking partnership providing free legal services to hundreds of clients of the Philadelphia Nurse-Family Partnership and Mabel Morris Family Home Visit Programs. Funded by multi-year grants from the Rita and Alex Hillman and Oak Foundations, this interdisciplinary collaboration integrates civil legal aid services into the daily operations of a large public health nursing program that provides home visiting and family support services to low-income mothers. In addition to remediating the unmet social, health and legal needs of individual clients, PHNLP engages in systemic advocacy efforts. An advisory board of diverse stakeholders shapes a targeted policy agenda to affect change at the community level. PHNLP utilizes a rigorous public health evaluation to measure impact on individuals, for continuous quality improvement, and to for long-term sustainability. Return on investment and social return on investment of the project will be tracked over the grant period.

B3: Moving Beyond the Clinic: Engaging in Policy Work to Address Systemic Challenges
Room: Cosmopolitan A (Third Level)

Sylvia Caley, JD, MBA, RN
Scott Crain, JD
Dennis Hsieh, MD, JD
Samantha Morton, JD

Traditionally, medical-legal partnerships (MLPs) focus on direct services. However, MLPs often encounter the same problem that affects different patients repeatedly. This session explores how MLPs can use the data gathered from direct casework to engage community and government stakeholders in order to make systemic policy change. Here we highlight the policy work from several different medical-legal partnerships around the country on issues such as housing, utilities, and public benefits, to discuss a step-wise approach to how MLPs can identify critical issues that their patients face and take an upstream approach to fix the problem. We will discuss the challenges around finding the time and resources to pursue policy work, how to engage strategic partners, and identifying the proper levers to facilitate change. Furthermore, we will discuss the implementation, stakeholder management, and real-time reassessment needed to ensure effective policy change.

B4: Building a Health Community to Help Children and Families Thrive
Room: Cosmopolitan C/D (Third Level)

Andrew Beck, MD, MPH
Adrienne Henize, JD
Melissa Klein, MD, MEd
Donita Parrish, JD

Improving the health of families and reducing health disparities in targeted populations can only be accomplished
through innovative community-clinical collaborations. This interactive workshop describes how the MLP model supports national and local community health initiatives and furthers the creation of additional multi-disciplinary partnerships designed to meet the social needs of vulnerable families. Presenters will share how, building on the strength of their MLP, they have expanded the continuum of care for low-income families – improving physician and social worker education; providing more effective clinical care; extending advocacy efforts into targeted neighborhoods; and offering new opportunities for collaborative research and knowledge sharing. Using Maslow’s Hierarchy of Needs as a framework, participants will prioritize social risks within their own patient population; determine community partners with a shared vision to engage; and establish the framework to systematically build collaborations to improve the health and well-being of patients, families and neighborhoods.

**B5: Delivering the Data: How to Collect, Analyze, and Exchange Information to Make the Case for Sustainability**

Room: Discovery (Third Level)

Dinetta Armstrong, MPA
Lydia Gottesfeld; JD
Trish Mims, MSN, MBA/HCM
Sherry Thomas, JD

A panel of MLP administrators and staff will present on challenges and strategies for sustaining MLP at Federally Qualified Health Centers (FQHCs). Panelists will share their work creating data collection systems and data sharing processes to show the value of MLP through increasing the rate of insured patients and community impact. The panel will discuss how to implement strong data collection systems on both the health care and legal side, which data is important to capture, and how to present and exchange data to show both social return on investment to the community and return on investment to the FQHC to make the case for sustainability. Panelists will present on how to incorporate these strategies in MLPs at various stages of development with a range of perspectives from very new partnerships to more long-standing MLPs.

**B6: A Health Impacts Framework for Legal Aid Data Collection (for Legal Aid Lawyers and Staff)**

Room: Network (Second Level)

Sandra Frasser, MD
Diane Goffinet, JD
Keegan Warren-Clem, JD, LLM
Andrew Weaver, JD

At last - a basic framework for the national legal aid community to begin to understand and describe the potential health impacts of traditional legal aid work. Developed by MLPSI in 2014-15, this framework offers a detailed list of potential health impacts that can be adapted into any legal aid data collection system. This session will offer a practical dialogue by members of two MLPs on methods of adopting health impacts language and strategies in the legal aid context, how to synchronize this framework with the broader legal aid data collection mandate and mission, and how this strategy both bolsters and aligns with NCMLP research and evaluation activities.
B7: Stone Soup: MLP in the Dental Home  
Room: Vision (Third Level)  
Anne Hofgen, JD  
Jeanne Edevold Larson, MS

Northwest Minnesota hosts one of the most innovative, cross sector collaborations—Northern Dental Access Center provides a dental home for 10,000 people in need, within a rural region the size of Vermont. With a cutting edge set of core values, authentic approach to patient-centeredness, and commitment to rigorous performance management, Northern Dental and its partner agencies have garnered regional, state and national awards—setting a new standard in creating a true dental home from the scarcity of a safety net setting. It’s new, Dental-Legal Partnership is one-of-a-kind and completes an array of integrated and coordinated set of patient support services available to low income people to address barriers to care. Social justice demands the integration of public health, social services, primary care, AND access to dental care; every person has a right to the dignity of a true dental home.

B8: High Impact MLP Pro Bono Clinics  
Room: Regency E/F (Second Level)  
Monica Fennell, JD  
Lisa Hoffman, MSW  
Anna Kirkman, JD  
Jacqueline Pimentel-Gannon, JD  
Steve Scudder, JD (moderator)

MLP pro bono clinics present an opportunity to leverage corporate, law firm, and local bar association attorney resources. This format maximizes resources by serving many patients over the course of a single day, with the goal of positively impacting health outcomes. This workshop will explore what types of legal needs are appropriate for a 1-day clinic event. Participants will hear from a firm pro bono manager and a local bar association representative regarding the appeal of these clinic models for volunteer attorneys. A social worker will discuss her essential role in pre-screening patients and families and facilitating patient participation. And the hospital MLP Director will address how this format builds capacity. The panel will share best practices for creating an efficient and effective 1-day MLP clinic and review successes and challenges that they have encountered.

B9: Keeping the Power On: A Collaborative Approach to Address Environmental Health  
Room: Cosmopolitan A (Third Level)  
Ada Fenick, MD  
Alice Rosenthal, JD  
Bonnie Roswig, JD

Heat and lights are fundamental to a families health. Learn about an innovation project in Connecticut that employs a multi-pronged approach to protecting utility service. This approach included training for medical professionals, community clinics, hospital policy, data development, pro bono involvement and legislative action.

B10: Integrating Employment Related Legal Services with Prenatal Care  
Room: Cosmopolitan C/D (Third Level)  
Jenna Gerry, JD  
Misa Perron Burdick, MD, MAS

Virtually all women receive prenatal care and most work throughout their pregnancies. This presents a truly unique opportunity to reach people and inform them of their rights during a particularly vulnerable time by providing access to legal services via a health system that women already use – prenatal care. To make use of this opportunity, the Legal Aid Society-Employment Law Center, San Francisco Department of Public Health and San Francisco General Hospital have formed a partnership (known as the “Work and Family MLP”) aimed at providing low income pregnant women in San Francisco with access to free employment-related legal services. The partnership uses provider training; patient education; onsite clinics and integrated screening protocols and referral services to change healthcare practice, legal services and patient outcomes.

B11: Filtering Impact Upwards: Arkansas Medicaid Extravaganza  
Room: Discovery (Third Level)  
Mary Claire Hyatt, JD  
Giana Messore, JD  
Anna Strong, MPH, MPS
Arkansas MLPs have successfully pursued major systemic change by “filtering impact upwards” on the targeted issue of Medicaid access. In 2015, community health clinic partners reported widespread problems with delays in Medicaid application processing. In response, Legal Aid of Arkansas and MLP partners launched targeted intervention through a “Medicaid Extravaganza” to generate volume, then leveraged it into impact. The advocates launched a campaign of impact-building advocacy, including blanketing the state agency with hearing requests, forging connections with stakeholders, meeting with high-level state officials, gathering data, and litigation. In a two-week span, attorneys received 103 Medicaid intakes, 10 times more than average. To date, our efforts have resulted in over 100 Medicaid approvals. The workshop will discuss how MLPs can facilitate systemic change through the “filtering up” process. Presenters will discuss the planning, successful execution, and constructive failures of the Extravaganza, including statistical analysis of the financial benefit to medical partners.

**B12: Issue-based Community Coalition Building**

**Room: Network (Second Level)**

Janet Albers, MD  
Carolyn Pointer, JD  
Sameer Vohra, MD, JD

Armed with a CHNA identifying asthma disparities as a community priority, and information from our legal partners about housing conditions, we met with the state health department, and received a small grant which enabled us to fund a pilot study around asthma triggers. More importantly, we leveraged our title as the “Sangamon County Asthma Champions” to start building a coalition of healthcare workers, our newly minted MLP, the state and local public health departments, and the local children’s hospital, and the school nurses, to tackle the wide range of socio-economic factors leading to poor asthma control in children in certain zip codes. We will discuss our experience and best practices to adopt this model in your town.
B13: Battling Lead: Building a Community Response to Lead Poisoning in Children
Room: Vision (Third Level)

Joel Davidson, MD
Healther Hall, JD
Erica Montague Krapf, PhD
Jaime-Lyn Poh, JD
Liz Tobin Tyler, JD (moderator)

In this roundtable discussion participants will explore how several OhioMLPs and their communities have worked to find, develop and analyze data to identify neighborhoods and individual cases of lead exposure. OhioMLPs will share their strategies for creating systemic change in the areas of housing and education. Participants will have the opportunity to share their own successes and partnerships, and to identify and discuss solutions to common barriers in addressing lead poisoning.

B14: The Devil is in the Data: Sharing Information is Key to Promoting Integration
Room: Regency E/F (Second Level)

Laura Hoffman, JD
Erin Loubier, JD
Samantha Morton, JD
Kerry Rodabaugh, MD

Forming partnerships across the health, public health and legal sectors requires navigating issues of confidentiality and privacy as well as ensuring attorney-client privilege is assured. This workshop will feature practitioners from two of the oldest MLPs in the country – MLP | Boston and Whitman-Walker Health in DC (each of whom is actively engaged with integration in the CHC and Medicaid ACO landscapes, respectively) as well as health care and privacy attorney experts to discuss how these issues play out on the ground. The session will also highlight best practices and areas where continued work is needed to fulfill the promise of full integration of legal services as enabling and compensable healthcare services.

B15: Community Impact of Rural MLP through Adult Guardianship

Libby Brill
Shan Campbell, RN, MHA, CCM
Andrea Long, JD, MHA
Michael E. Lynch, MD

Untreated mentally ill adults are super-utilizers of emergency departments and psychological services. Thus increasing hospital admissions and expending community resources at a higher rate. The aim of this workshop is to examine how medical-legal partnership teams can work together to identify, address, and redirect these patients to obtain proper healthcare through the appointment of a guardian. The result of these measures provide a positive sustaining environment for these mentally ill adults, while decreasing the drain on multiple community resources including shelters, police services, food pantries, jails, and healthcare. The analysis combines data from fieldwork in both the medical and legal context, utilizing both healthcare savings and socio-economic data. The workshop focuses on how guardianship opportunities can be promoted as a means of reducing crime, hospital visits, and improving overall community health.

B16: MLP in Tennessee: A Statewide Access to Justice Initiative
Room: Cosmopolitan C/D (Third Level)

Janet Goode, JD
Charlie McDaniel, JD
Lauren Mutrie, MD, MS
Jonathan Streen, JD

In 2015, the Tennessee Bar Association made an unprecedented push to increase awareness and support for Medical-Legal Partnerships. An MLP Working Group was formed and charged with three primary tasks: promotion of MLPs within the bar, outreach to partners outside the bar and secure TBA endorsement of a policy in support of MLPs. Each of these tasks involved concerted awareness and educational efforts, including articles in the Tennessee Bar Journal, a full-day joint CLE/CME and a series of webcasts and live trainings. Working Group membership included individuals from civil legal aid organizations, law schools, private attorneys, in-house & corporate counsel, physicians and representatives from medical and hospital professional associations. The Working Group
continues to build on the success of its first year and faces challenges as it grapples with its ongoing role in supporting the development and sustaining of MLPs in the state, including an innovative partnership in Memphis.

**B17: MLP Funding: Grants and Beyond**  
**Room: Discovery (Third Level)**

Ken Bennett, JD  
Jay Chaudhary, JD (Moderator)  
David Hillman, OD  
Nina Lux Brahm, JD

This session will explore three different funding sources for medical-legal partnership: (1) grants, (2) hospital funding, and (3) a “subscription” based model involving multiple health systems. Panelists include a grants officer from a charitable foundation, grants director from a municipal public health agency, and two attorneys who have convinced hospitals and health systems to fund their work.

**B18: Developing a Strategy to Assess MLPs’ impact on Health System Savings, Learner Competencies, and Patient/Community Health Outcomes**  
**Room: Network (Second Level)**

Malika Fair, MD, MPH (moderator)  
Amy Lewis Gilbert, JD, MPH  
Susan McLaren, MPH, FACHE  
Holly Stevens, PhD, MA

Medical schools and teaching hospitals routinely engage in practices that focus on improving community health, however there’s a lack of solid evidence to highlight effective practices, such as MLPs. Three AAMC-member institutions (Children’s National Health System-Healthy Together-Children’s Law Center; Emory University School of Medicine-Health Law Partnership; and Indiana University School of Medicine-Eskanazi Health Medical-Legal Partnership) were selected to participate in the AAMC Accelerating Health Equity Advancing through Discovery (AHEAD) learning cohort to collaboratively develop and implement metrics to evaluate the impact of their established MLPs on patient/community health, health system savings, and learner outcomes. During this session, the cohort will highlight the processes and lessons learned to identify feasible metrics and engage key health care and legal stakeholders in an effort to underscore the measurable benefits of MLPs and how they are addressing social and economic health disparities at the local level.
**B19: MLP in the Rural Health Center Context – Lessons on Tele-technology and Priority Setting**  
*Room: Vision (Third Level)*

Trish Aniol  
Rachel Clifton, BA  
John Orzekowski, BA, MTS  
Patricia Vanhook, APRN, PhD, FNP-BC, FAAN

Using the recently formed medical-legal partnership in East Tennessee as a case study, this session will focus on MLP practice in a rural setting, where the distance between legal and health partners is up to five hours, and the availability of services for low-income patients is uneven. Using tele-technology to communicate between partners, and elevating the combined health and legal priority of children’s healthcare insurance access and optimization, the East Tennessee MLP has tackled some of the common challenges of rural MLPs, and brought new solutions to rural MLP practice.

**B20: MLP and Early Childhood Systems: Early Lessons from Project DULCE**  
*Room: Regency E/F (Second Level)*

Samantha Morton, JD  
Jennifer Murphy Sims, PT, DPT  
Marina Pantchenko, JD  
Robert Sege, MD, PhD, FAAP

Building on the published findings from a randomized controlled trial conducted at Boston Medical Center Pediatrics, the Center for the Study of Social Policy is leading replication of Project DULCE (Development Understanding and Legal Collaboration for Everyone) in five communities nation-wide (CA, FL, VT) through an initiative that brings together Early Childhood Systems, Healthcare Systems, and Legal Partners in a highly structured way in each community. Over several years, these communities will participate in a co-design process that adapts the DULCE model to local conditions and opportunities. County-level leaders are involved and the initiative is launching with intentional strategies to promote sustainable scaling. Innovations to be covered include: a. Deep integration of MLP activity in Early Childhood Systems framework; b. High level of engagement and investment by governmental actors; and c. Refinement of “preventive law” dimension of MLP practice through back-up relationship with Family Specialists.

**B21: MLP Clinics as Research/Policy Labs and Capacity Builders**  
*Room: Cosmopolitan A (Third Level)*

Emily Benfer, JD, LLM  
Tomar Brown, JD, LLM  
Medha D. Makhlouf, JD  
LuAnn Sowko, PhD, MSN, RN  
Joel Teitelbaum, JD, LLM (moderator)

What is the value added by MLP clinics to the larger MLP community? MLPs based in law school clinics are uniquely situated to explore the shared value of health with a variety of community stakeholders, to inspire major innovations in MLP practice, and to build the capacity of the MLP movement. This is due, in part, to their relative adaptability; freedom to engage in experimental collaborations involving research and policy advocacy; and ability to shape the future study of health law. These activities align with the educational mission of MLP clinics, which include teaching students, creating knowledge, and instilling a commitment to social justice. The presenters will discuss how they have included interdisciplinary education and community stakeholders into the research and public policy work of their MLP clinics. Audience members will have opportunities to ask questions about the projects, share experiences, and participate in a brainstorming session on the value that MLP clinics can add to the larger MLP community.

**B22: How Medical-Legal Partnership Services Utilize Geographical Hot-Spotting Maps to Influence Community Health for Asthmatic Children**  
*Room: Cosmopolitan C/D (Third Level)*

Dawn Boolyard, MSN  
George Thomas, JD

Childhood asthma causes high rates of hospitalizations, emergency room visits and missed school days, particularly among poor and African American children. Our medical-legal partnership (MLP) conducted research to examine housing-related asthma triggers in relation to geographical hot-spots of pediatric patients at an inner-city respiratory clinic in Lucas County, Ohio. Aided by an interactive hot-spotting
map, we found that patients in very low opportunity zones of
the county had high rates of mold, cockroach and smoke trig-
ggers. Based on these hot-spots, we make referrals for home
nursing visits and legal services. The MLP also intends to uti-
lize the hot-spot maps for community education and to drive
public policy changes for better housing conditions. Session
participants will learn to (1) integrate medical and legal teams
to conduct geographical hot-spotting studies, (2) create geo-
ographical hot-spotting maps to target MLP services, and (3)
apply data-driven evidence to influence local discussion and
public policy.

**B23: Payer Innovations for Medical-Legal Part-
nership**

**Room: Discovery (Third Level)**

Katie Adamides, JD  
Gayle Elledge, JD, MS, RD  
J Garay, LISW  
Karla Perry, JD  
Rebecca Russo, JD  
Woody Thorne, MSEd (moderator)

In this session, two medical-legal partnerships describe ways
they are targeting public financing to support their programs.
First, representatives from Legal Aid of Cleveland and Metro-
Health Medical Center share how medical-legal partnership
services are integrated into the supportive services offered
through the hospital’s Accountable Care Organization (ACO).
Second, representatives from LawNY and Rochester Regional
Health share how they are connecting medical-legal partner-
ship activities and data collection to the types of outcomes
that the New York State Medicaid program (DSRIP) aims to
fund.

**B24: A Deep Dive on Medical-Legal Partnership
Performance Measures**

**Room: Network (Second Level)**

Marsha Regenstein, PhD  
Jennifer Trott Holtzman, MPH

This session will introduce participants in detail to seven
medical-legal partnership performance measures developed
by the National Center for Medical-Legal Partnership. Pre-
senters will discuss the value to individual programs of col-
lecting data on these measures related to patient, provider
and financial impact. Programs that have been collecting
data on these measures over the last year will offer insights
on strategies for successful data collection, as well as chal-
lenges to widespread implementation.
Thursday Affinity Groups
12:15 p.m. - 1:30 p.m.

Achieving Sustainable Funding from Your Healthcare Institution
Open to all Summit participants
Room: Regency E/F
William Aseltyne, JD
Scott Crain, JD
Ada Fenick, MD
Danielle Ishem, MPA, MPH
Samantha Morton, JD
Annette Quayle, MS
Kerry Rodabough, MD
Jay Sicklick, JD
James Teufuel, MPH, PHD

During this affinity group, representatives from medical-legal partnerships in Connecticut, Massachusetts, Nebraska, and Washington will share how they achieved sustainable operational funding from their health care institutions. They will lead a discussion about: (1) aligning medical-legal partnership with a healthcare institution’s vision of health; (2) creating linkages to other health care team members; (3) integrating rigorous evaluation protocols into service activities; and (4) confronting questions about organizational identity and shared values across healthcare and legal institutions.

Communicating Mission Across Sectors
Open to all Summit participants
Room: Network
Kate Marple, MS

Partnering across sectors requires learning to describe your mission and work in your partner’s framework and language. A central challenge for medical-legal partnerships is articulating the value of medical-legal partnership to a variety of stakeholders that have different frameworks and priorities. This affinity group is a chance to discuss how to cultivate stories and build messages for different MLP audiences with other MLP practitioners and Kate Marple, the National Center for Medical-Legal Partnership’s Manager for Communications.

Strengthening Medical-Legal Partnership Practice in Health Center Settings
Open to all Summit participants
Room: Vision

This affinity group provides a platform to stimulate conversation and share ideas, innovations and challenges regarding practicing medical-legal partnership in mental and behavioral health care settings. The goals of this session are to give practitioners in mental/behavioral health care settings (1) an opportunity to meet and network; and (2) space to discuss common issues facing behavioral health MLPs including how to move from patients toward policy interventions.

Strengthening Medical-Legal Partnership Practice in Mental / Behavioral Health Care Settings
Open to all Summit participants
Room: Discovery
Mallory Curran, JD

This affinity group provides a platform to stimulate conversation and
MLP Data Collection in Legal Case Management Systems (Or: How to Pull Your MLP Off Excel and End Double Data Entry)
Open to participants from legal aid agencies
Room: Regency E/F

Mallory Curran, JD

The National Center for Medical-Legal Partnership is in the midst of a major effort to make the MLP-related data collected by legal aid agencies more streamlined and more uniform, improving the experience of data collection and reporting for frontline MLP legal staff and administrators alike. This session will demonstrate MLP customization currently available in LegalServer, but MLP legal partners using Pika, Kemps / Prime, Legal Files and other electronic case management systems are also encouraged to attend. Led by NCMLP Senior Advisor Mallory Curran, practitioners who have been piloting these changes in LegalServer will also share their experiences. This project is separate from, but aligns with, the newly launched Medical-Legal Partnership performance measures pilot program.

MLP Health Care Champions Breakfast
Open to all attendees who are nurse practitioners, nurses, physicians, social workers, and other front-line members of the health care team.
Room: Vision

Linda Caurdy-Bess, LMSW
Robert Pettignano, MD, MBA
Megan Sandel, MD, MPH
Patti Vanhook, PhD, RN, FNP-BC, FAAN

This breakfast is a chance for MLP health care practitioners to gather and discuss the role of health care champions in advancing medical-legal partnership in their institutions, and to provide feedback on strategies for growing medical, nursing, social work, and other health care participation in MLP. It is also a chance for health care providers to network with others in the field.

MLP Pro Bono Breakfast
Open to all attendees
Room: Discovery

Lori Chumbler, JD
Mytrang Nguyen, JD
Steve Scudder, JD
Cassandra Stewart

Join national pro bono and medical-legal partnership experts for a discussion of the role and dynamics of successful integration of pro bono resources and capacity into a high-functioning medical-legal partnership. With perspectives from the Legal Services Corporation, the American Bar Association, and Walmart general counsel’s pro bono team, this conversation will illuminate new pro bono strategies and help MLP programs focus on core best practices for pro bono optimization.
Course Director

Megan Sandel, MD, MPH
Associate Professor, Boston University Schools of Medicine and Public Health
Medical Director, National Center for Medical-Legal Partnership

Nursing Advisor

Patti Ann Collins, DNP, MSN/MBA, RN
Lead Nurse Planner, Boston University School of Medicine

Target Audience

Attorneys, paralegals, patient navigators, physicians, public health professionals, nurses, and social workers.

Learning Objectives

At the conclusion of this activity, participants will be able to:

1. Summarize statewide and systemwide strategies for providing integrated health and legal services for vulnerable populations.
2. Develop practical strategies for measuring and evaluating the impact of medical-legal partnership on patients and health care institutions.
3. Describe two strategies for addressing population health that can be addressed by a health care entity clinic partnering with a local civil legal aid entity.

Core Competencies

This activity has been developed with consideration given to the American Board of Medical Specialties Six Core Competencies. This activity will increase your competency in the area of interpersonal & communication skills.

Credit Hours by Profession

ATTORNEYS

Attorneys seeking CLE credit will need to contact their individual bar associations. For questions on the above continuing education credits, please contact the Boston University CME office at cme@bu.edu or 617-638-4605.

NURSES

This educational activity has been provided by Continuing Nursing Education Provider Unit, Boston University School of Medicine and jointly-provided by the National Center for Medical-Legal Partnership at the George Washington University.

Continuing Nursing Education Provider Unit, Boston University School of Medicine is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

PHYSICIANS

TWO-DAY MEETING (THURSDAY / FRIDAY SUMMIT)

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Boston University School of Medicine and the National Center for Medical-Legal Partnership at the George Washington University. Boston University School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

Boston University School of Medicine designates this live activity for a maximum of 10.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

THREE-DAY MEETING (101 INTENSIVE PLUS SUMMIT)

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Boston University School of Medicine and the National Center for Medical-Legal Partnership at the George Washington University. Boston University School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

Boston University School of Medicine designates this live activity for a maximum of 15 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

AMERICAN ACADEMY OF PEDIATRICS

This continuing medical education activity has been reviewed by the American Academy of Pediatrics and is acceptable for a maximum of 15 AAP credits. These credits can be applied toward the AAP CME/CPD Award available to Fellows and Candidate Members of the American Academy of Pediatrics.
SOCIAL WORKERS

TWO DAY MEETING (THURSDAY / FRIDAY SUMMIT)

CES, provider #1117, is approved as a Provider for Social Work Continuing Education by the Association of Social Work Boards (ASWB) www.aswb.org, through the Approved Continuing Education (ACE) program. CES maintains responsibility for the program. ASWB Approval Period: 10/5/15 through 10/5/18. Social Workers should contact their regulatory board to determine course approval.

Social Workers participating in this course will receive 9.5 clinical continuing education clock hours.

THREE DAY MEETING (101 INTENSIVE PLUS SUMMIT)

CES, provider #1117, is approved as a Provider for Social Work Continuing Education by the Association of Social Work Boards (ASWB) www.aswb.org, through the Approved Continuing Education (ACE) program. CES maintains responsibility for the program. ASWB Approval Period: 10/5/15 through 10/5/18. Social Workers should contact their regulatory board to determine course approval.

Social Workers participating in this course will receive 14 clinical continuing education clock hours.

Conference Management

Claire P. Grimble, CMP
Conference Operations Manager
Office of Continuing Medical Education
Boston University School of Medicine
Email: cgrimble@bu.edu
Phone: 617-638-4604
Is a minor stockholder of Amgen