

APHCA 40TH ANNIVERSARY

**Soul
Connect**

GO ALL IN

**40TH ANNUAL
CONFERENCE & EXPO
SEPTEMBER 16-18, 2025**



**THE HOTEL AT AUBURN UNIVERSITY
AUBURN, AL**



This year marks a significant milestone for the Alabama Primary Health Care Association — 40 years of purpose-driven service, unwavering resilience, and transformative community care. As we celebrate this legacy, we invite you to our 40th Annual Conference and Expo, ***Soul Connect: Go All In. It Changes Everything.*** At its core, this theme calls us to reconnect with the **soul** of our work — the identity, heartbeat, and character that defines what it means to be a community health center. Beyond metrics and mandates, there lies a deeper force and impact: passion, purpose, and people who improve the lives of over 350,000 Alabamians every year. In this season of change, challenge, and opportunity, it's time to **go all in** — to realign our **Heart** (culture, attitude, and behavior), **Mind** (knowledge, skills,

and application), **and Systems** (structure, accountability, and performance) toward what truly matters. It's time to reignite the core that fuels our work and breathes life into our impact on the health of Alabama's communities.

The **soul** of our workforce shows signs of wear — from mental and system fatigue, uncertainty, and the exhaustion of doing much with little for too long. Yet the work we began decades ago — this good, noble, and essential work — is not finished. We must reenergize our **collective soul** to finish it with excellence, courage, and vision for the next 40 years.

Join us for this year's conference and engage in a space to **reflect, recharge, and rise** to the demands before us. Each session offers learning and leadership development across clinical, operational, financial, and governance domains — while anchoring every session with the core values that give our work meaning. You'll find opportunities to:

- Reconnect with the why of the work — personally and professionally.
- Engage in conversations with health center leaders from across the country who have strengthened culture, resilience, performance, and health center impact.
- Deepen finance, operations, quality, and leadership competencies while rekindling energy, creativity, and connection.
- Challenge assumptions and spark innovations to optimize resources and increase community health impact.
- Celebrate the victories, honor the struggles, and envision what is next.

**When we connect to the soul of our work and go all in — everything changes.
We Are APHCA.**

TEAM ENGAGEMENT AND COMPETITION

LIGHTS. CAMERA. ACTION!

You're the star! Help us premiere your health center story. This year, as part of the 40th Anniversary Chair's reception, all eyes are on you. You are invited to create a movie premiere poster that showcases your center's unique culture, vibrant personality, and powerful story of impact and value. Think bold titles, memorable taglines, and inspiring imagery that captures who you are and what you stand for. Whether your story is one of resilience, innovation, service, or heart, we want to celebrate it all! Feel free to be fun, dramatic, vintage, modern, or totally unexpected. This is your chance to be seen, be celebrated, and Go All In. I can't wait to see the story; only you can tell it.

Poster Guidelines

Format to print in portrait orientation, size 18X24. Send your image file to APHCA, and we will handle the printing.

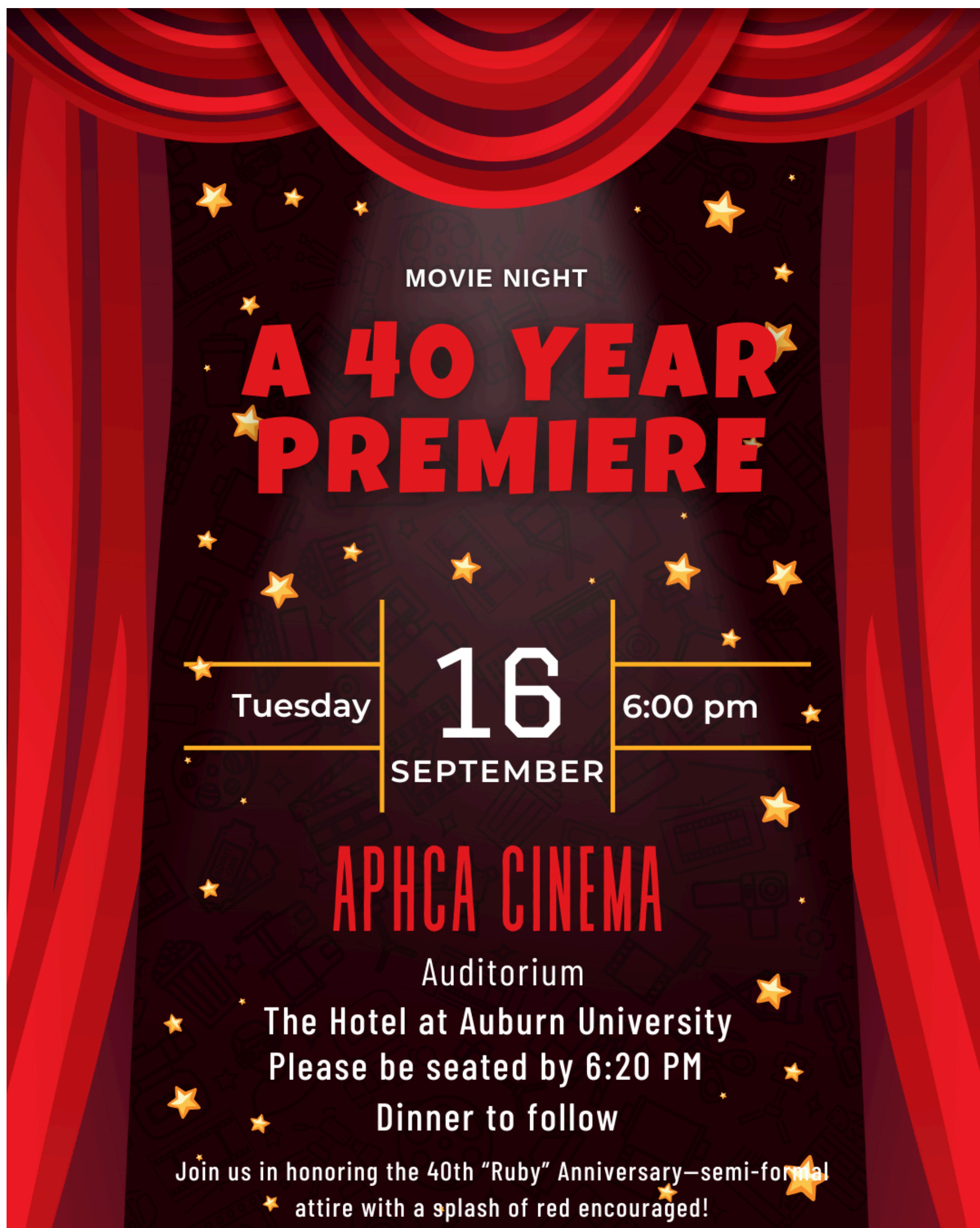
Reflect your center's identity—past, present, and future.

Deadline: **August 25, 2025**

Display: Posters will be featured in our "Hall of Stars" at the 40th Anniversary Chair's Reception: APHCA Premieres on September 16 and during the conference event.



YOU'RE INVITED! CELEBRATE 40 YEARS WITH US.

A movie night poster featuring a dark background with a pattern of film-related icons (cameras, film strips, stars) and a large red curtain at the top. The text is centered and includes the event title, date, time, and location.

MOVIE NIGHT

A 40 YEAR PREMIERE

Tuesday 16 6:00 pm
SEPTEMBER

APHCA CINEMA

Auditorium
The Hotel at Auburn University
Please be seated by 6:20 PM
Dinner to follow

Join us in honoring the 40th "Ruby" Anniversary—semi-formal attire with a splash of red encouraged!

***WE'VE GOT SPIRIT, YES WE DO. WE'VE GOT
SPIRIT, HOW BOUT YOU?***



APHCA SPIRIT WALK & TAILGATE

Reception



HC Teams will line up at 3:45 PM for an APHCA Spirit Walk through the expo hall. Reception to follow with drinks and game day snacks, and over 40 exhibitors to visit! Bring your shakers and team spirit!



At 3:45 PM
17 September 2025



At Expo Hall
Grand Ballroom

AGENDA AT A GLANCE

Platinum Presenting Sponsors: Henry Schein, Labcorp, Pfizer Vaccines

TUESDAY, SEPTEMBER 16, 2025	
7:30 AM – 4:00 PM	Registration & Vendor Exhibitor Setup
8:00 AM – 9:00 AM	Participant Breakfast
9:00 AM – 10:00 AM	Policy & Program Updates, Alabama Medicaid Agency
10:00 AM – 10:15 AM	Break
10:15 AM – 11:15 AM	Federal Policy & Funding Updates, National Association of Community Health Centers
11:15 AM – 12:30 PM	Health Center Program Updates, HRSA, Lunch & Learn
12:30 PM – 2:00 PM	National PCA Policy Updates
2:00 PM – 2:15 PM	Break
2:15 PM – 3:45 PM	Opening Plenary Session & Keynote
6:00 PM – 8:00 PM	Chairman's Reception
WEDNESDAY, SEPTEMBER 17, 2025	
7:00 AM – 4:00 PM	Registration & Vendor/Expo Hall Open
7:30 AM – 8:30 AM	Participant Breakfast
7:00 AM – 8:30 AM	Platinum Sponsors Breakfast with APHCA Board of Directors, <i>Invite Only</i>
8:30 AM – 10:00 AM	Breakout Sessions
10:00 AM – 10:30 AM	Break
10:00 AM – 10:30 AM	Face-to-Face Meetings with Health Center Leadership
10:30 AM – 12:00 PM	Breakout Sessions
12:00 PM – 1:00 PM	APHCA Board of Directors Lunch, <i>Invite Only</i>
12:00 PM – 1:00 PM	Participant Lunch
1:00 PM – 2:00 PM	Breakout Sessions
2:00 PM – 2:30 PM	Break
2:00 PM – 2:30 PM	Face-to-Face Meetings with Health Center Leadership
2:30 PM – 3:30 PM	Breakout Sessions
3:45 PM – 5:00 PM	APHCA Walk Reception, Expo Hall
THURSDAY, SEPTEMBER 18, 2025	
7:30 AM – 12:00 PM	Registration & Vendor/Expo Hall Open
7:30 AM – 8:30 AM	Participant Breakfast
8:30 AM – 9:30 AM	Breakout Sessions (<i>see detailed session descriptions</i>)
9:30 AM – 10:00 AM	Break
9:30 AM – 10:00 AM	Face-to-Face Meetings with Leadership
10:00 AM – 11:00 AM	Breakout Sessions (<i>see detailed session descriptions</i>)
11:00 AM – 11:30 AM	Break
11:00 AM – 11:30 AM	Face-to-Face Meetings with Health Center Leadership
11:30 AM – 12:30 PM	Breakout Sessions (<i>see detailed session descriptions</i>)

National Speaker Highlights

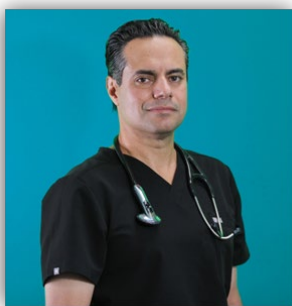
APHCA Welcomes...

Dr. Robert Fields, EVP, Chief Clinical Officer, Beth Israel Lahey Health



Dr. Robert Fields is a family medicine physician and serves as the EVP, Chief Clinical Officer at Beth Israel Lahey Health, a Harvard-affiliated, 14-hospital system in Boston, MA. In this role, Dr. Fields leads system efforts for quality and safety as well as the strategy and operations for primary care, behavioral health, system lab, pharmacy, and home health, including hospital-at-home. He also leads the system's 1115 Medicaid waiver response as well as all managed care and population health strategies. Dr. Fields began his career as an independent primary care physician with a particular emphasis on the care of underserved Latino patients in Western North Carolina. After launching one of the first successful value-based networks in the state, he was recruited to Mount Sinai and ultimately became the Chief Population Health Officer, driving population health and managed care strategies for the system.

Dr. Luis Garza, Chief Medical Officer, Project Vida Health Center



Luis R. Garza, MD, is the Chief Medical Officer at Project Vida Health Center (PVHC), a position he assumed in March 2014. Dr. Garza has certification for the American Board of Family Medicine and is a Community-Based faculty Member for Texas Tech University Health Sciences College in El Paso. Dr. Garza believes in helping the underserved communities in El Paso and Hudspeth Counties and provides Primary Care to over 14,000 patients annually. Luis is a graduate of Instituto Tecnológico y de Estudios Superiores de Monterrey in Mexico and completed his Family Medicine Residency Program at Texas Tech University El Paso.

Lathran J. Woodard, Owner, L A Johnson Consulting, LLC



With nearly five decades dedicated to public health, Lathran Andrea Johnson Woodard retired on December 31, 2023, after 49 years of service—13 with the Department of Health and Environmental Control and 36 with the South Carolina Primary Health Care Association and the Community Health Center movement. Throughout her career, she championed the growth and sustainability of federally funded health centers in South Carolina and nationwide, ensuring access to

vital care for underserved communities. Now in her “next season,” she continues to support the health care community as a consultant, offering her deep expertise and commitment to accessible and affordable, community-based care.

Vacheria Keys, Associate Vice President of Policy and Regulatory Affairs, National Association of Community Health Centers (NACHC)



Vacheria Keys is the Associate Vice President of Policy & Regulatory Affairs at the National Association of Community Health Centers in Washington, DC. In her current role, she oversees federal policy, state policy, and regulatory affairs. Vacheria advocates and develops health policies that improve access for underserved patients and reimbursement for health centers across the nation. For nearly three years, Vacheria leads NACHC’s 340B policy work, Medicaid and Medicare policy, COVID-19 related policies, and more. Previously,

Vacheria worked as a Regulatory Affairs Specialist at the American Society of Anesthesiologists and a Reproductive Rights and Health Legal Fellow at the National Women's Law Center. As a double HBCU grad, Vacheria takes great pride as a Spelman Alumna and graduate of Howard University’s School of Law.



See Biographies Section for a full list of APHCA’s distinguished speakers.

Tuesday, September 16: APHCA Policy Forum

This full-day series offers health center leaders a comprehensive look at the evolving healthcare policy landscape, from state Medicaid updates to national health center advocacy and HRSA priorities. Participants will gain timely insights into policy shifts impacting funding, compliance, and service delivery. The day concludes with a powerful keynote on the future of value-based care and how health centers can lead transformational change through realignment, collaboration, and a commitment to better outcomes for vulnerable populations.

Who Should Attend: The Policy Forum is designed for all conference participants including executive and senior leaders, health center staff, health center board members, and partners.

9:00 AM – 10:00 AM

The State of Alabama Medicaid: Program and Policy Updates

Bo Offord, Commissioner (Invited), and Barry Cambron, Deputy Commissioner, Health Systems, Alabama Medicaid Agency

Mr. Cambron will provide a timely Medicaid update on the state of the Medicaid program including its budget, maternal health efforts, Alabama's Coordinated Health Network (ACHN), anticipated impact from federal and state policy changes, and related program updates.

10:00 AM – 10:15 AM: Break

10:15 AM – 11:15 AM

The State of Health Center Policy: Program and Policy Updates

Vacheria Keys, Associate VP of Policy and Regulatory Affairs, National Association of Community Health Centers

Ms. Keys will share the latest information on advocacy, federal and state health policy developments, and their implications for health centers and the people and communities they serve.

11:15 AM – 12:30 PM

The State of HRSA Programs and Policy

Erin Davis, Deputy Office Director, Health Resources & Services Administration (invited)

Across a networking lunch-and-learn format, Erin Davis from HRSA will update current activities, program requirements, and their impact on the health center's daily functions. Topics include the latest HHS national priorities to address targeted populations, federal policy changes, demographic/performance data, and the latest information on the horizon at HRSA/BPHC.

12:30 PM – 2:00 PM

A National Health System Policy Perspective

Colleen Meiman, National Policy Advisor for State Associations of Community Health Centers

This session will update participants on health centers' most pressing policy issues and discuss strategies for engaging leadership to stay focused on policy impact rather than the slippery slope of today's current political environment.

2:00 PM – 2:15 PM: Break

2:15 PM – 3:45 PM

General Plenary and Keynote Session: The Power of Transforming Health Outcomes through Realignment and Engagement

Dr. Robert Fields, EVP, Chief Clinical Officer, Beth Israel Lahey Health

Value-based care expectations are reshaping healthcare by prioritizing quality outcomes over volume, particularly for vulnerable and at-risk populations. To drive meaningful, lasting changes, health centers, payers, and networks must work together to build a more coordinated, patient-centered system that leverages over 50 years of lessons learned with innovative approaches to staffing, care delivery, financing and operations.

Educational Tracks & Breakout Sessions

Wednesday, September 17

Track One: Governance

Empowered Governance: Strategic Planning and Organizational Assessment for Health Center Board Members

Who Should Attend: Health center board members, Chief Executive Officers, health center planning staff

8:30 AM – 10:00 AM, 10:30 AM – 12:00 PM, 1:00 PM – 2:00 PM, 2:30 PM – 3:30 PM

Lathran J. Woodard, Owner, L A Johnson Consulting, LLC

As stewards of Alabama's community health center system, health center board members play a vital role in shaping the long-term direction and sustainability of their organizations. This interactive day is designed to equip board members with the knowledge and tools needed to fulfill their responsibilities and actively contribute to the strategic planning process and related assessment efforts.

Participants will gain a clear understanding of their governance responsibilities in conducting and overseeing a comprehensive environmental assessment and SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis. Participants will enhance their awareness of the current state and federal landscapes and engage in an analysis of critical areas including:

- Governance Engagement and Effectiveness
- Services and Delivery
- Workforce and Productivity
- Quality and Value Framework

- Financial, Operational, and Clinical Performance Oversight

Through real-world examples and peer engagement, board members will learn how to ask the right questions, interpret key data, and contribute meaningfully to a strategic planning process that aligns with mission, community needs, and regulatory expectations. This session reinforces the board's strategic oversight while fostering a culture of accountability, innovation, and continuous improvement.

Key Takeaways:

- Understand the board's role in guiding and supporting strategic planning processes
- Learn how to engage in an environmental assessment that identifies internal and external forces impacting the organization
- Use SWOT analysis as a tool to assess and enhance organizational performance across services, workforce, quality, finance, and operations
- Develop confidence in establishing and evaluating strategic priorities and performance to ensure mission alignment and long-term sustainability

Track Two: Quality and Performance Improvement

Transforming Care Delivery: Strategies for Sustainable Change that Lead to Improved Outcomes

Who Should Attend: Chief Medical Officers, Clinical Directors, quality improvement staff, executive and operational leadership, data and informatics staff, clinic site managers and support staff, patient navigators and care coordinators

8:30 AM – 10:00 AM

Outcomes-Based Care: Transforming the Future of Health

Dr. Robert Fields, EVP, Chief Clinical Officer, Beth Israel Lahey Health

Outcomes-based care is fundamentally reshaping the healthcare landscape by shifting the focus from volume to value, placing greater emphasis on quality outcomes, particularly for vulnerable populations. This model calls for more than incremental change; it requires a coordinated, patient-centered approach that drives long-term impact through sustainable, data-informed solutions.

In this session, participants will:

- Explore the core principles and goals of outcomes-based care
- Learn how to apply network-driven strategies to improve care delivery and population health
- Identify common barriers and opportunities in transitioning from volume to value
- Understand how to align teams and systems around shared metrics and goals
- Gain actionable insights into building collaborative, scalable models that break down silos and support equity-focused care

10:00 AM – 10:30 AM: Break

10:30 AM – 12:00 PM

Driving Provider Adoption and Alert Optimization through Peer Review

Dr. Luis Garza, Chief Medical Officer, Project Vida Health Center

This session explores how to foster a culture of continuous improvement by mentoring provider teams and embedding data-driven practices into daily workflows. Learn how organizations are using peer review and provider variation profiling (PVP) to increase provider adoption, enhance alert effectiveness, and build a sustainable data strategy. By transforming culture from within, health centers can elevate both clinical quality and operational performance, turning data into action and peer feedback into lasting change.

12:00 PM – 1:00 PM: Lunch

1:00 PM – 2:00 PM

Fireside Chat: Advancing Value-Based Care Through Collaboration and Innovation

Dr. Robert Fields, EVP, Chief Clinical Officer, Beth Israel Lahey Health

Dr. Luis Garza, Chief Medical Officer, Project Vida Health Center

LuAnn Kimker, RN MSN, PCMH CCE, Senior Vice President of Clinical Innovation, Azara Healthcare

Join us for an engaging and candid fireside discussion on navigating the shift from volume-based care to value-driven outcomes across every level of healthcare organizations. This panel will highlight how strategic collaboration among key stakeholders can fuel innovation, improve care delivery, and elevate patient outcomes. Panelists will share insights and real-world examples focused on:

- Expanding access and improving outcomes through patient-centered, value-based models
- Strengthening provider collaboration—with a focus on addressing the complex needs of the growing older adult population
- Leveraging network-driven strategies to support population health and drive measurable, sustainable impact

This session offers a unique opportunity to gain practical perspectives on breaking down silos, forming high-impact partnerships, and leading transformative change in today's evolving healthcare environment.

2:00 PM – 2:30 PM: Break

2:30 PM – 3:30 PM

Closing Care Gaps for Better Outcomes: Three Small Steps to Make a Big Difference

Carrie Taylor, Director of Clinical Transformation and Product Adoption, Azara Healthcare

Even modest changes can have a powerful impact on patient care. This session will explore three practical, achievable steps health centers can take to close care gaps—an essential component of improving clinical quality and outcomes. Whether caused by system inefficiencies, provider oversights, or patient-related barriers, care gaps hinder the delivery of timely, evidence-based care. By equipping

staff with targeted strategies and a proactive mindset, organizations can align care with best practices, increase treatment effectiveness, and enhance patient satisfaction while making meaningful progress, one step at a time.

Track Three: Finance & Operational Management

Mastering Fee Schedules and the Sliding Fee Program: Strategies for Compliance, Sustainability, and Impact

Nicole Moscatelli, Senior Manager, Forvis Mazars

David Fields, Partner, Forvis Mazars

Who Should Attend: Chief Financial Officers, Finance Directors, Controller, revenue cycle teams, finance and operational staff, clinic site managers, compliance and grants management staff

This comprehensive training series is designed for Health Center leaders, billing teams, compliance officers, and finance professionals who are responsible for setting, maintaining, and communicating fee schedules and Sliding Fee Discount Programs (SFDPs). With a focus on compliance, operational integration, and financial alignment, this four-part series offers both foundational knowledge and practical application strategies to strengthen your organization's approach to patient billing and affordability.

Learning Objectives:

By the end of this series, participants will be able to:

- Develop and maintain compliant and sustainable fee schedules
- Ensure their SFDP aligns with HRSA expectations and community needs
- Integrate financial policies across systems and teams
- Communicate changes effectively to both staff and patients

8:30 AM – 10:00 AM

Charge Setting, Maintenance, and Compliance

Dive into the core principles of setting market-based fee schedules that meet payer expectations and support organizational sustainability. This session will cover methods for maintaining accurate, up-to-date charge structures, special considerations for Medicare services, and critical compliance factors that must be addressed to avoid risk.

Key Topics:

- Market-based fee schedule development
- Maintaining accurate and current schedules
- Medicare-specific rate considerations
- Compliance with HRSA and federal requirements

10:00 AM – 10:30 AM: Break

10:30 AM – 12:00 PM

Sliding Fee Discount Program (SFDP) Design and Oversight

Explore the purpose, structure, and regulatory requirements of the SFDP. Learn how to manage and maintain your sliding fee structure while ensuring that your program aligns with HRSA compliance expectations and effectively supports patients in need.

Key Topics:

- Purpose and structure
- Building and maintaining a compliant SFDP
- Managing program updates and documentation
- Addressing special population considerations

12:00 PM – 1:00 PM: Lunch

1:00 PM – 2:00 PM

Practical Application and Operational Integration

Connect strategy to practice by integrating fee schedules with budgeting, UDS reporting, and revenue cycle operations. Learn how to collaborate across teams, leverage technology, and prevent billing errors or denials. Real-world case studies will highlight audit insights and fee schedule recalibration strategies.

Key Topics:

- Aligning fee schedules with budget and cost reports
- Collaboration with billing and coding teams
- Technology and tools
- Case studies and real-world examples

2:00 PM – 2:30 PM: Break

2:30 PM – 3:30 PM

Communication and Change Management

Effective communication is key to successful implementation. This session will provide tools for training staff, communicating updates internally, and engaging patients and leadership in the process. Strategies for board engagement and transparent patient education will be highlighted.

Key Topics:

- Internal training and communication
- Patient-facing transparency
- Gaining Board buy-in and reporting outcomes

Bonus Takeaways: How to create a compliant fee schedule from the ground up; Conducting a self-audit of your Sliding Fee Discount Program

Educational Tracks & Breakout Sessions

Thursday, September 18

Track One: Workforce

Leading for Impact: Communication, Engagement, and Resilience

John Bentley, Founder, Power2Transform

Who Should Attend: Executive and senior leadership, operational managers, health center staff and board members

8:30 AM – 9:30 AM

Communicate Like a Leader

Strong communication is essential in the high-pressure, high-impact world of community health. This session explores what causes breakdowns in workplace conversations—and how to shift toward trust-building dialogue that brings people together. You'll learn a straightforward, effective model to reduce conflict, strengthen relationships, and lead respectful, clear conversations, even during difficult moments. Walk away with tools you can use right away to foster calm, connection, and collaboration across your team and center.

9:30 AM – 10:00 AM: Break

10:00 AM – 11:00 AM

Engagement Starts with the Brain

In community health, emotional resilience fuels engagement. This session unpacks how stress and brain-state awareness directly impact team dynamics and staff morale. You'll learn a practical approach to identifying your own brain state, regulating your response, and modeling the kind of leadership that energizes others. With greater self-awareness, you'll be better equipped to shape a positive, engaged culture—starting with yourself.

11:00 AM – 11:30 AM: Break

11:30 AM – 12:30 PM

Leading Through Change Without Burning Out

Community health centers are no strangers to constant change—new policies, shifting priorities, evolving patient needs. This session offers tools to help you lead through it all without sacrificing your well-being. Learn how to stay present, focused, and supportive in the face of uncertainty. Discover strategies to manage your energy, guide your team through transition, and build resilience across your organization. Participants will be empowered to lead with steadiness, compassion, and clarity.

Track Two: Quality and Performance Improvement

Building a High-Impact Data Ecosystem: Leveraging DRVS to Transform Care Delivery and Outcomes

Carrie Taylor, Director of Clinical Transformation and Product Adoption, Azara Healthcare

Who should attend: Quality Improvement Leaders, clinical managers and care team coordinators, Information Technology and health informatics staff, data analysts, compliance and reporting staff

In today's rapidly evolving healthcare landscape, a well-structured data ecosystem is more than a technical asset—it's a strategic imperative. This full-day immersive session will dive deep into how Data, Reporting, and Visualization System (DRVS), as a centralized data warehouse and analytics platform, can power performance improvement, guide resource allocation, and ultimately improve patient and population health outcomes.

Participants will gain a comprehensive understanding of the essential components of a robust data infrastructure and how to align these tools with their organization's clinical and operational goals. Through hands-on demonstrations, peer learning, and real-world case studies, attendees will explore how DRVS enables:

- Proactive identification of patient needs through risk stratification and predictive analytics
- Seamless integration into care team workflows to support timely, coordinated interventions
- Data-driven population health strategies that address equity, access, and quality
- Real-time monitoring of clinical performance, operational efficiency, and compliance metrics
- Informed decision-making at all levels, from front-line staff to executive leadership

Whether your organization is new to DRVS or looking to expand its use across your organization, this session will equip you with practical strategies and actionable insights to harness your data for greater impact. Come ready to engage, collaborate, and leave empowered to lead a data-informed transformation at your health center.

8:30 AM – 9:30 AM

PCMH and DRVS: Using Data to Drive Population Health and Improve Outcomes

Discover how Patient-Centered Medical Home (PCMH) principles come to life through the strategic use of DRVS (Data Reporting & Visualization System) tools. This session will explore how organizations are leveraging population health analytics to uncover trends, monitor co-occurring conditions, and proactively manage patient care. By integrating data into care coordination and care management programs, providers can close care gaps, enhance patient engagement, and improve clinical outcomes. Learn how DRVS supports the transition to a more proactive, outcomes-focused care model—one that aligns with PCMH goals and advances whole-person care.

9:30 AM – 10:00 AM: Break

10:00 AM – 11:00 AM

Data on a Mission: Turning Insights into Action

Make your data work with purpose. This session will empower healthcare leaders and teams to harness data as a strategic asset—driving efficiency, guiding decisions, and improving outcomes across the organization. Learn how to interpret and apply quality measures to gain a clearer picture of your population's health and identify opportunities for targeted improvement. By aligning data with mission-driven goals, participants will leave equipped to make smarter, faster, and more impactful decisions that advance care delivery and organizational performance.

11:00 AM – 11:30 AM: Break

11:30 AM – 12:30 PM

Teamwork Makes the Dream Work: Building a Strong Foundation with Data Validation

Accurate data is the cornerstone of effective decision-making, but ensuring data quality requires more than one effort. In this session, learn how the APHCA Health Center Controlled Network (HCCN) has partnered with Health Centers to implement robust, collaborative data validation strategies. Discover how ongoing data hygiene practices, cross-team coordination, and a shared commitment to data integrity create the foundation for a reliable, organization-wide data strategy. When teams work together to validate and maintain clean data, the result is more informed decisions, stronger outcomes, and a system that truly supports value-based care.

Track Three: Finance & Operational Management

Strengthening Financial Foundations for Health Centers

Jacob Crosby, Lead Consultant, Community Link Consulting

Achieving operational and financial sustainability is critical for the long-term success of community health centers. This track offers essential tools and knowledge to support sound fiscal management and strategic decision-making. Participants will explore the core principles of budgeting, gain hands-on experience with break-even analysis, and enhance their forecasting capabilities. From understanding HRSA grant requirements to anticipating future financial scenarios, this series is designed to help leaders and finance teams align resources with mission, navigate funding uncertainties, and drive organizational resilience.

Who Should Attend: Chief Financial Officers, Finance Directors, Controller, revenue cycle teams, finance and operational staff, clinic site managers, compliance and grants management staff

8:30 AM – 9:30 AM

Budgeting Concepts – Organizational and HRSA Budgets

In this session, we will explore the fundamental concepts of budgeting within an organization, focusing on both organizational budgets and HRSA grant budgets. Participants will gain insights into the purpose and importance of budgeting as a planning tool, accountability mechanism, and transparency device. We will also discuss common budgeting problems, approaches to budgeting, and the formatting of budget statements. Additionally, the session will cover the budgeting process, including revenue and expense breakdowns, and the specifics of HRSA budgets, such as Service Area Competition (SAC) and Noncompeting Continuation (NCC) budgets.

Objectives:

- Participants will learn how budgeting serves as a planning tool to achieve organizational goals, ensures accountability, and promotes transparency within the organization
- Participants will be able to recognize common issues such as overestimated revenue and large variances in expenses, and understand how the budgeting process can help identify opportunities for improvement and inefficiencies
- Participants will gain knowledge on the detailed budgeting process, including revenue and expense breakdowns, and learn about the specific requirements and components of HRSA grant budgets, such as SAC and NCC budgets

9:30 AM – 10:00 AM: Break

10:00 AM – 11:00 AM

Mastering Financial Stability: Break-Even Analysis for FQHC Operational and Financial Sustainability

HCs are facing financial challenges and uncertainty around ongoing grant funding amidst the Federal budget, changes in Medicaid, and threats to 340B. This presentation will introduce a break-even analysis tool specifically designed for FQHCs, providing participants with a comprehensive understanding of its significance in financial management. Break-even analysis helps FQHCs assess financial viability by identifying the point where total revenue matches total costs, ensuring neither profit nor loss. Attendees will learn about the necessary components - fixed costs, variable costs, and revenue factors - and how to apply them to FQHCs. Practical strategies for utilizing break-even analysis to inform financial and operational decisions within FQHCs will also be explored.

Objectives:

- Participants will learn the fundamental concepts of break-even analysis, including fixed costs, variable costs, and revenue factors, and how these components interact to determine the break-even point for FQHCs.
- Attendees will gain insight into how break-even analysis can be specifically applied to FQHCs, considering their unique revenue streams, cost structures, and regulatory environment
- Participants will learn practical strategies for leveraging break-even analysis to make informed financial decisions within FQHCs, such as pricing services, assessing the feasibility of new programs or initiatives, and optimizing resource allocation to achieve financial sustainability

11:00 AM – 11:30 AM: Break

11:30 AM – 12:30 PM

Mastering Strategic Forecasting

This training session will focus on enhancing forecasting skills crucial for financial stability and strategic growth. Participants will engage in hands-on activities, case studies, and discussions to develop robust forecasting models tailored to the unique challenges and opportunities in the HC landscape. This workshop aims to empower CFOs with the tools and insights necessary to accurately predict financial outcomes and effectively plan for future developments.

Objectives:

- Learn to implement advanced forecasting models that incorporate FQHC-specific variables, such as government funding cycles, patient volume fluctuations, and regulatory changes.
- Gain the ability to use forecasting data to make informed strategic decisions, including resource allocation, budget adjustments, and long-term financial planning.
- Enhance skills in predictive financial reporting to improve accuracy and reliability, ensuring better compliance with financial regulations and more effective communication with stakeholders.

Speaker Biographies

John Bentley, Founder, Power2Transform

John Bentley is the founder of Power2Transform, a leadership development consultant with over 41 years of experience in public service. His journey from early struggles as a young leader to a distinguished career in the U.S. Air Force exemplifies the power of self-leadership and resilience. John's expertise lies in crafting customized leadership programs that deliver measurable business outcomes. His clients include NASA, Alabama Farm Credit, Merck Pharmaceutical, and Alabama Primary Health Care Association. John's mission extends beyond professional success; he is deeply committed to helping others lead meaningful lives. He leads the You Are A GIFT Foundation, which supports mothers overcoming prescription drug addiction. He is an accomplished author of "You Are A GIFT" and "52 Ways to Motivate Yourself," and also shares his insights in the audio program "17 Biblical Principles of Success." Through his work, John encourages everyone to create a legacy of success that others can build upon.

Barry Cambron, Deputy Commissioner of Health Systems, Alabama Medicaid Agency

Barry Cambron is Deputy Commissioner of Health Systems at the Alabama Medicaid Agency. In this role, he leads the Agency's Managed Care Operations Division, Networks and Physician Program Division, and Data Analytics Division. He was formerly the Director of Analytics at Alabama Medicaid, where he oversaw the Agency's business and quality analytics functions, quality measure evaluation and development, and standardized measurement and reporting. Barry has more than 20 years of experience in the public and private sectors of the healthcare industry. He has a Master of Science in Health Administration and a Master of Business Administration from the University of Alabama at Birmingham.

Jacob Crosby, Lead Consultant, Community Link Consulting

Jacob graduated from Lewis and Clark State College with a bachelor's degree in business administration with an emphasis on accounting. Before joining CLC, he worked in manufacturing as a staff accountant, where he oversaw sales tax and compliance reporting, and the general accounting month-end process. Jacob has a background in audit preparation, month-end work, Medicare and Medicaid cost reports, grant budget preparation, and interim CFO support.

Erin N. Davis, Deputy Office Director, Health Resources and Services Administration

Erin Gardner Davis serves as the Deputy Office Director in the Office of Health Center Program Monitoring (OHCPM). In this role, Mrs. Davis monitors and provides support for nearly 1,500 community health centers that provide primary care to approximately 29 million patients. Additionally, OHCPM provides oversight of the technical assistance contract that supports the training and technical assistance, and operational site visits for the Health Center Program. Prior to this role, Mrs. Davis served as the Senior Advisor, for the Bureau of Primary Health Care, Office of Southern Health Services, South Central Division. In that capacity she provided programmatic support to the Office and Division Project Officers. Prior to entering federal service, Erin was the Assistant Administrator of Operations at Mercy Hospital- Scranton in Scranton, PA, a former affiliate of Catholic Healthcare Partners (CHP), the largest health system in Ohio and one of the largest nonprofit health systems in the U.S. Mrs. Davis earned her Master of Science in Healthcare Administration from Florida Agricultural and Mechanical University, where she graduated top of her class. Erin has a true passion for providing quality health care to the underserved communities and vulnerable populations

David Fields, Partner, Forvis Mazars

David has devoted his career to the CHC industry and is passionate about helping CHCs meet the healthcare needs in the communities they serve. His goal is to bring the significant CHC experience of Forvis Mazars in accounting, reimbursement, grants management, tax, and a variety of other finance-related topics to the firm's clients and the industry. As a part of the Forvis Mazars CHC center of excellence, David serves as a key team resource on audit, grants management, and financial operational issues and cost report preparation services for CHCS. His CHC audit experience has made him a firmwide resource on Single Audit issues and their application to healthcare. David is a frequent speaker on CHC topics, including grants management and other operational issues for the National Association of Community Health Centers (NACHC) and several state primary care associations. He has worked with the Forvis Mazars team to develop the CHC CFO Boot Camp series that has been taught virtually and in person across the country. David also has assisted management teams and boards of directors by interpreting complex accounting and grant issues. He is a member of the American Institute of CPAs, the Missouri Society of CPAs, and the Institute of Management Accountants, Inc. He is a Certified Management Accountant® (CMA®) and a Certified Financial Manager (CFM). David is a 1999 summa cum laude graduate of Southwest Baptist University, Bolivar, Missouri, with a B.S. degree in accounting.

Dr. Robert Fields, Executive Vice President & Chief Clinical Officer, Beth Israel Lahey Health

Dr. Robert Fields is a family medicine physician and serves as the EVP, Chief Clinical Officer at Beth Israel Lahey Health, a Harvard-affiliated, 14-hospital system in Boston, MA. In this role, Dr. Fields leads system efforts for quality and safety as well as the strategy and operations for primary care, behavioral health, system lab, pharmacy, and home health, including hospital-at-home. He also leads the system's 1115 Medicaid waiver response as well as all managed care and population health strategies. Dr. Fields began his career as an independent primary care physician with a particular emphasis on the care of underserved Latino patients in Western North Carolina. After launching one of the first successful value-based networks in the state, he was recruited to Mount Sinai and ultimately became the Chief Population Health Officer, driving population health and managed care strategies for the system. In March 2023, he joined Beth Israel Lahey Health as the first EVP and Chief Clinical Officer where he continues to drive strategy and operations for many of the community-based care settings while also marrying his interests in healthcare economics with sustainable and equitable delivery of care. His areas of interest include healthcare policy and economics, system integration and transformation to value, as well as the integration of social determinants of health into the daily operations of health systems. Dr. Fields also hosts a podcast called Healthcare360 focused on healthcare transformation with a focus on BILH's journey to becoming a system. Dr. Fields has previously served as the Board Chair of the National Association of ACOs (NAACOS) and the Board of America's Physician Groups (APG) and Healthfirst. He is also a member or chair for various national committees on quality and measure development for the National Quality Foundation and CMS. He earned his medical degree from the University of Florida College of Medicine and completed a Family Medicine Residency at the Mountain Area Health Education Center in Asheville, NC where he was Chief Resident. Dr. Fields earned his Master of Health Administration from the University of North Carolina at Chapel Hill.

Dr. Luis Garza, Chief Medical Officer, Project Vida Health Center

Luis R. Garza, MD, is the Chief Medical Officer at Project Vida Health Center (PVHC), a position he assumed in March 2014. Dr. Garza has certification for the American Board of Family Medicine and is a Community-Based faculty Member for Texas Tech University Health Sciences College in El Paso. Dr. Garza believes in helping the underserved communities in El Paso and Hudspeth Counties and provides Primary Care to over 14,000 patients annually. Luis is a graduate of Instituto Tecnológico y de Estudios Superiores de Monterrey in Mexico and completed his Family Medicine Residency Program at Texas Tech University El Paso.

Vacheria Keys, Associate Vice President of Policy & Regulatory Affairs, NACHC

Vacheria Keys is the Associate Vice President of Policy & Regulatory Affairs at the National Association of Community Health Centers in Washington, DC. In her current role, she oversees federal policy, state policy, and regulatory affairs. Vacheria advocates and develops health policies that improve access for underserved patients and reimbursement for health centers across the nation. For nearly three years, Ms. Keys has led NACHC's 340B policy work, Medicaid and Medicare policy, COVID-19 related policies, and more. Previously, she worked as a Regulatory Affairs Specialist at the American Society of Anesthesiologists and a Reproductive Rights and Health Legal Fellow at the National Women's Law Center. As a double HBCU grad, Vacheria takes great pride as a Spelman Alumna and graduate of Howard University's School of Law.

LuAnn Kimker, RN MSN, PCMH CCE, Senior Vice President of Clinical Innovation, Azara Healthcare

LuAnn Kimker is the Senior Vice President of Clinical Innovation at Azara Healthcare and is a nurse executive who is passionate about healthcare transformation and innovation in primary care. She has extensive experience working with safety net organizations, patient-centered medical home programs, population health, and health information technology. LuAnn's focus is to assist organizations in turning data into information and driving meaningful success. She's responsible for the Clinical Transformation team and develops programs to support the successful adoption of value-based care tools. LuAnn enjoys the challenge of helping others see the good they're doing and taking it to the next level. She believes disruption is good, focus is overrated, and improved attention to health equity is imperative.

Colleen Meiman, National Policy Advisor, State & Regional Associations of Community Health Centers

Colleen Meiman is the National Policy Advisor for state and regional associations of Community Health Centers (CHCs), often called Primary Care Associations (PCAs.) Previously, she spent six years with the National Association of Community Health Centers (NACHC) as the Director of Regulatory Affairs and Senior Policy Advisor. She also spent over two decades in the Federal government, including in the HHS Secretary's Office, in the US Senate, in CMS, and in numerous positions within HRSA. Colleen's expertise is in federal programs such as 340B, Medicaid, the ACA, and the community health center program.

Nicole Moscatelli, Senior Manager, Forvis Mazars

Nicole is a Senior Manager within Forvis Mazars Southern Missouri Community Health Centers Practice. Starting her career in 1995, Nicole brings more than 25 years of revenue cycle experience, involving internal audit and revenue cycle in the provider realm, including a period of time at a Federally Qualified Health Center. Nicole concentrates primarily on the delivery of revenue cycle consulting services. She also leads a dedicated group of consulting professionals serving community health centers (CHCs). Her focus is assisting CHCs with compliance and reimbursement through efficient revenue cycle teams and workflows that meet the healthcare needs in the communities they serve. From fee schedule assessments, sliding fee discount program reviews, and single questions to full onsite revenue cycle assessments, Nicole approaches every project as an opportunity to provide Unmatched Client Experiences™ and to grow. Nicole is a frequent speaker at state primary care association conferences, helping to educate health center representatives and expose them to opportunities to evaluate toward additional revenue, compliance, and efficient workflows. Nicole is a member of the Healthcare Financial Management Association, Northeast Pennsylvania Chapter, serving as Chair of the Program Committee and as president for 2020 through 2021. She is a Certified Healthcare Financial Professional (CHFP), specializing in patient financial services. Nicole is a 2014 graduate of Marywood University, Scranton, Pennsylvania, with an M.H.S.A. degree.

Carrie Taylor, Director of Clinical Transformation, Azara Healthcare

Carrie Taylor is the Director of Clinical Transformation and Product Adoption at Azara Healthcare, where she partners with community health centers and networks to improve care delivery through strategic data integration and technology adoption. Drawing from her early experience as a nurse, Carrie brings a deep understanding of frontline care and a passion for using quality analytics to drive meaningful,

system-level improvements. Carrie has championed data-informed strategies to enhance patient outcomes, particularly in underserved communities. Her work focuses on empowering health centers and networks with tailored solutions that address their unique needs, combining visionary leadership with a steadfast commitment to health equity and innovation.

Lathran J. Woodard, Founder, L A Johnson Consulting, LLC.

With nearly five decades dedicated to public health, Lathran Andrea Johnson Woodard retired on December 31, 2023, after 49 years of service—13 with the Department of Health and Environmental Control and 36 with the South Carolina Primary Health Care Association and the Community Health Center movement. Throughout her career, she championed the growth and sustainability of federally funded health centers in South Carolina and nationwide, ensuring access to vital care for underserved communities. A respected servant leader, Ms. Woodard served on numerous state and national boards, including the National Association of Community Health Centers—where she most recently served as Board Chair—the National Association of Female Executives, the National Rural Health Association, and the American Society of Association Executives. Now in her “next season,” she continues to support the health care community as a consultant, offering her deep expertise and commitment to equitable, community-based care.