



NATIONAL ASSOCIATION OF
Community Health Centers®

2024

FOM/IT
CONFERENCE & EXPO



FINANCIAL OPERATIONS MANAGEMENT
INFORMATION TECHNOLOGY

CONFERENCE: October 28-29
PRECONFERENCE WORKSHOPS: October 27
Hilton San Francisco Union Square
San Francisco, CA
HYBRID EVENT

FOM/IT Workshop Submission Form

Proposed Title (maximum 20 words)

Program Description (maximum 250 words)

Knowledge Level: (choose one)

Basic

Intermediate

Advanced

Prerequisite (required for knowledge levels of Intermediate and Advanced):

Topic:

- **Financial Sustainability**
 - 340b Program
 - Federal Grants Management
 - Budgeting and Budget Forecasting Best Practices
 - Cost Reporting
 - Long Term Financial Goals for Community Health Centers
 - Revenue Cycle Optimization Techniques
 - Staffing Optimizing Strategies
 - Value-Based Care Readiness and Contracting
- **Workforce**
 - Employee Well-Being
 - Justice, Equity, Diversity, and Inclusion (JEDI) Initiatives
 - Leadership Development

- Performance Management
- Recruiting, Developing, and Retention
- Succession Planning
- Organizational Culture
- **Operations**
 - Achieving Health Equity
 - Community Health Workers, Enabling Services Staff
 - Emergency Management/Preparedness
 - M&A (Mergers & Acquisitions)
 - Medicaid Unwinding
 - Operationalizing and Sustaining Innovation
 - Patient Engagement and Satisfaction
 - Pharmacy Operations (340B, Contract Pharmacy, Integration clinical pharmacy models, pharmacy residency programs)
 - Promising Practices for SDOH and REAL Screening / Strategies for closing the loop
 - Promising Practices for Behavioral Health and Specialty Care via Telehealth
 - Remote Workforce – Hiring, Managing, Retaining
 - Service Line Operations (Dental, Vision, Lab, Imaging, etc.)
 - Staffing your IT Team
 - Strategic Planning
 - Supply Chain Challenges
 - Virtual Care Teams and Telehealth Integration Community Needs Assessments
- **Clinical Informatics**
 - Data and Interoperability Standards and Best Practices
 - Electronic Health Record (EHR) Reporting and Systems Integration
 - Mapping and Understanding Workflow and Fostering Usability
 - Overcoming Data Quality and Interoperability Challenges
 - Staffing Your Clinical Informatics Team
 - UDS+ and Reporting
- **Data Strategy**
 - Data Infrastructure
 - Data Strategy and Field Integration
 - Data Collection, Analysis, and Interpretation
 - Data Reporting Tools and Templates
 - Leveraging Technology and Data Analytics
 - SDOH Data Capture and Utilization

- **Technology**
 - Artificial Intelligence
 - Cybersecurity and Data Protection
 - Digital Health Innovation
 - Health Information Exchange
 - Machine Learning
 - Remote-Patient Monitoring
 - Technology integration and Equity
- **InnovationX:** NACHC is adding innovation content to all conferences to build upon the success of the [2023 InnovationX event](#). Please consider choosing this topic if your proposed session or expertise is focused on innovation process(es), skills and culture; an innovation(s) that will be novel to most health centers, PCAs and/or HCCNs; operationalizing and sustaining innovation; innovation lessons learned and failure; or implanting/utilizing the 5X's of Health Center Innovation.

Target Audience: (choose all that apply)

Administrators	HIT
Board Members	Nurses
C-Suite	Pharmacists
Clinicians	Social Workers
Clinical Directors	S/RPCA Director
Dentists	All
Finance Directors	

Which [NACHC Strategic Pillar\(s\)](#) will your session align with? (check all that apply)

Pillar 1: Equity and Social Justice	Pillar 4: Reliable and Sustainable Funding
Pillar 2: Empowered Infrastructure	Pillar 5: Improved Care Models
Pillar 3: Skilled and Mission-driven Workforce	Pillar 6: Supportive Partnerships

Describe how your session will help position health centers as the Partner, Employer, and/or Provider of Choice for primary care and advancing health equity. (maximum 250 words)

Learning Objectives (3 required)

1. _____
2. _____
3. _____

Speakers/Moderators: (need the following information for each)

First Name: _____ Last Name: _____
Credentials (if any): _____
Title: _____
Company/Organization: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Role: Moderator Speaker

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