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Agenda

Day One – Monday, July, 20, 2026

7:15am – 8:00am
Conference Registration & Networking Breakfast

8:00am – 8:15am
Chairperson's Opening Remarks

8:15am – 9:00am
Integrated Behavioral Health in Primary Care
Embedding behavioral health directly into pediatric practices creates immediate access to brief interventions and reserves scarce specialty capacity for complex cases. This session will explore co-located therapist models, brief consultation approaches and care coordination connecting families to resources. Learn about workflow design, scheduling strategies, EHR integration and scope of practice determining which presentations are managed in primary care versus specialty referral. The speaker will examine staffing models, common conditions addressed including ADHD and anxiety, and reimbursement through collaborative care codes and value-based contracts.
Timothy Munzing, MD, FAAFP
Kaiser Permanente Residency Program Director Emeritus
Kaiser Permanente

9:00am – 9:45am
Addressing Adolescent Substance Use in Pediatric Behavioral Health
Adolescent substance use frequently co-occurs with mental health conditions. Learn about universal screening, motivational interviewing and brief interventions. This session will explore family-based treatment, medication-assisted treatment for opioid use disorder and continuum

of care including recovery high schools. The speaker will explore confidentiality considerations, harm reduction approaches, addressing underlying trauma and overcoming stigma.

Mason S. Turner, MD, DFASAM
Senior Medical Director, Enterprise, Behavioral Health Clinical Program
Intermountain Health

9:45am – 10:15am
Networking & Refreshments Break

10:15-11:00am
Telehealth and Technology: Expanding Access and Improving Outcomes
Telehealth expands pediatric behavioral health access in rural areas, reduces transportation barriers and stretches limited workforce. This session will feature the Texas Child Health Access Through Telemedicine (TCHATT) program, which provides K-12 students with free teletherapy and telepsychiatry while they are in school. Learn about implementation models for school-based telehealth programs, technology infrastructure requirements, clinical engagement strategies for virtual sessions with children and adolescents, managing safety concerns during virtual visits, and state licensure considerations. Topics to be discussed will include:
· School-based telehealth program implementation including TCHATT model and outcomes data
· Service delivery models including synchronous, asynchronous and hybrid approaches
· Clinical engagement strategies and safety protocols for virtual sessions with students
· Digital tools for symptom tracking, appointment reminders and family engagement
· State licensure considerations

Kelly Sopchak, PhD, LSSP
Clinical Director of Texas Child Mental Health Care Consortium
Department of Psychiatry and Behavioral Sciences
Joe R and Theresa Long Lozano School of Medicine
UT Health San Antonio

11:00am – 11:45am
The Connection Between Trauma in Youth and Development of Opioid Use Disorder
Trauma can act as a gateway to the development of substance use disorders in general, and especially opioid use disorder. Trauma is interpreted as a form of pain, and the use of opioids is a way to manage the pain. Exposure to adverse childhood experiences (ACEs) demonstrates a dose–response relationship with opioid misuse, with individuals experiencing multiple forms of childhood trauma at significantly increased risk for early initiation, dependence, and overdose. Further, when combined with early opioid exposure pathways—such as prescription opioids following youth sports injuries—this risk is further amplified, highlighting the need for trauma-informed and prevention-focused prescribing practices (Felitti et al., 1998; Swedo et al., 2020; Guarino et al., 2021; Regmi et al., 2024). This presentation will focus on the impact of ACES (adverse childhood experiences) as well as other common types of youth trauma, such as sports injuries and the role that trauma plays in developing individuals vulnerable to opioid misuse both during youth and later in life.

Siobhan Morse, MHSA, CRC, CAI, PSS, MAC

Product Director, Behavioral Health
Universal Health Services

11:45am – 12:30pm
The Illusion of Prediction in Child and Adolescent Suicide Risk
Despite decades of research and increasingly sophisticated risk assessment tools, the ability to accurately predict suicide at the individual level remains limited. Traditional approaches often fail to capture the dynamic, context-dependent nature of suicidal behavior by emphasizing static risk factors and categorical stratification (e.g., low, moderate, high risk). This talk argues for a paradigm shift from prediction-focused models toward individualized, formulation-based approaches that integrate developmental, relational, cultural, and structural dimensions of risk. Drawing on emerging epidemiological paradoxes such as suicide occurring in individuals previously categorized as low risk, denial of ideation before death, and the high prevalence of healthcare contact before suicide, the presentation highlights the limitations of reductionist frameworks. Particular attention is given to underrecognized high-risk populations, including neurodivergent youth, sexual minority adolescents, and those experiencing early psychosis, as well as the growing impact of structural inequities and access to lethal means. The session will outline a clinically actionable model of suicide risk formulation, emphasizing risk status, risk state, available resources, and foreseeable changes. It will also address the ethical and medicolegal implications of shifting from prediction to foreseeability, underscoring the importance of documentation, continuity of care, and system-level interventions. Ultimately, this talk proposes a more nuanced psychiatry of suicidality, one that accepts the limits of prediction while strengthening prevention through context-sensitive assessment, relational engagement, and structural mitigation strategies.
Mayank Gupta, MD, CPE, DFAPA, DFAACAP
Chief Medical Officer
Family Psychological Associates
Behavioral Health Medical Director
Molina Healthcare, Inc.

12:30pm – 1:30pm
Networking Lunch

1:30pm – 2:15pm
From Crisis Response to Continuous Support: AI, Digital Tools, and the Future of Pediatric Behavioral Health
Pediatric behavioral health systems remain largely reactive, fragmented, and strained by workforce shortages, while youth distress often emerges earlier across schools, families, pediatric care, and digital life. This presentation will explore how privacy-preserving digital tools, real-world measurement, clinician-governed AI, and scalable brief interventions can support prevention and early response by helping trusted adults recognize concern sooner, guide youth toward appropriate support, and strengthen continuity of care. Drawing on work from the Child Mind Institute, including the Healthy Brain Network and Mirror digital journaling

platform, the talk will focus on how technology can extend human care relationships rather than replace them, with attention to safety, equity, implementation, and accountability.

Michael P. Milham, MD, PhD
Chief Science Officer, Phyllis Green and Randolph Cowen Scholar;
Director, Center for Integrative Developmental Neuroscience (IDN);
Director, Healthy Brain Network;
Senior Child and Adolescent Psychiatrist, Psychopharmacology Center
Child Mind Institute

2:15pm – 3:15pm
Panel Discussion: Addressing Health Equity for LGBTQ+ Youth and Underserved Populations
LGBTQ+ youth, children from racial and ethnic minority communities and other marginalized populations face elevated behavioral health risks alongside barriers accessing affirming care. Panelists will examine affirming care for LGBTQ+ youth addressing minority stress and family rejection, culturally responsive care for diverse communities, recruiting diverse workforce and measuring equity metrics. The discussion will explore addressing social determinants, meaningful community engagement and accountability structures.
Panelists:
Mason S. Turner, MD, DFASAM
Senior Medical Director, Enterprise, Behavioral Health Clinical Program
Intermountain Health

3:15pm – 3:45pm
Networking & Refreshments Break

3:45pm – 4:30pm
Adolescent Substance Use: Current Trends, Clinical Risks, and Emerging Treatment Approaches
This presentation will provide a clinically focused overview of adolescent substance use, including current epidemiologic trends, screening priorities, and evidence-based treatment approaches. Recent Monitoring the Future data continue to show historically low overall use, while noting emerging concerns include high-potency THC products, nicotine pouches, rising acuity among youth with co-occurring mental health conditions, and small increases in heroin and cocaine use that warrant careful clinical attention. The session will review practical approaches for primary care, emergency, pediatric, family medicine, and behavioral health settings, including confidential screening, SBIRT, motivational interviewing, family engagement, harm reduction counseling, safety planning, and referral pathways. Treatment discussion will emphasize developmentally appropriate care, integrated treatment for co-occurring depression, anxiety, trauma, ADHD, and suicidality, and the importance of involving caregivers while preserving adolescent trust and confidentiality. Highlights of treatment advances and "breakthrough" areas, including expanded use of medications for opioid use disorder in adolescents, increasing attention to contingency management, digital and text-based recovery supports, family-based interventions, school-linked care, peer recovery models, and low-barrier treatment access. Participants will leave with a concise clinical framework for identifying risk,

initiating brief intervention, reducing overdose risk, engaging families, and connecting adolescents to effective levels of care.

Samuel A. MacMaster, PhD
Chair of the Advisory Board
National Institute for Behavioral Health

4:30-5:15pm
School-Based Mental Health: From Screening to Intervention
Schools are essential partners in behavioral health prevention and early intervention. Learn about universal screening programs, tiered intervention frameworks and service delivery models including school-based health centers and telehealth. This session will explore addressing common student needs, obtaining parental consent, coordinating with school staff, billing Medicaid and ensuring culturally responsive care. Topics to be discussed will include:

- Universal screening and tiered intervention frameworks
- Service delivery models including school-based health centers and telehealth
- Coordination with school staff and special education teams
- Medicaid billing and financial sustainability strategies

Sean Perry, MBA
Founder, President, Chief Executive Officer
We R H.O.P.E., Inc

5:15pm
End of Day One

Day Two – Tuesday, July 21, 2026

7:15am – 8:00am
Networking Breakfast

8:00am – 8:15am
Chairperson's Remarks

8:15am – 9:00am
Beyond Trauma Care: Building Relationship-Centered Systems in Pediatric Behavioral Health
Pediatric behavioral health systems are often fragmented, reactive, and misaligned—leaving children and families to navigate inconsistent care across settings. This presentation introduces a relationship-centered, system-level approach grounded in the Developmental Trauma and Attachment Program (DTAP), demonstrating how organizations can move beyond trauma-informed care toward fully integrated, developmentally aligned systems. Drawing on real-world application and leadership experience, Matt Obert will explore how aligning staff, families, and cross-sector partners around a shared understanding of behavior and relationships leads to improved outcomes, reduced reliance on restrictive interventions, and stronger workforce engagement. Attendees will leave with practical strategies to shift from program-based thinking to coordinated systems that center healing, dignity, and long-term relational success.

Matt Obert, LCSW
President & CEO
Chaddock

9:00am – 9:45am
Redesigning the Child ADHD Assessment Pathway at Northern California Kaiser Permanente
Requests for ADHD assessments among children and adolescents have risen steadily in recent years. Serving a membership of 4.5 million across a large and diverse geographic region, Northern California Kaiser Permanente recognized the need to improve quality, consistency, and the overall member experience. In response, we partnered across pediatrics, family medicine, and mental health teams to design and implement a centralized ADHD assessment pathway. This population-based approach standardizes care delivery, reduces variability in evaluation practices, and improves timely access to high-quality assessments. By aligning workflows and leveraging multidisciplinary collaboration, the new model better meets growing demand while supporting clinicians and enhancing outcomes for patients and families.
Matthew Holve, MD
Child/Adult Psychiatrist
Chair of Chiefs for Outpatient Psychiatry
Site Chief Fairfield Mental Health
Kaiser Permanente

9:45am – 10:15am
Networking & Refreshments Break

10:15am – 11:00am
Child Psychiatry Access Programs as a Nexus of Interprofessional Training
Objective: Attendees will recognize how key components of pediatric mental health access programs can be leveraged to provide education on integrated behavioral health across the professional lifespan; from trainees (medical students, residents, fellows, and practicum students) to practicing clinicians (early, mid, and late career physicians). This presentation will illustrate how a Pediatric Mental Health Care Access (PMHCA) program can serve as a nexus for interprofessional education, workforce development, and integrated pediatric behavioral health care. Using the Nevada Pediatric Access Line (NV PAL) at the Kirk Kerkorian School of Medicine at UNLV as a case example, presenters will illustrate how PMHCA programs create unique opportunities for collaboration among child psychiatry fellows, pediatric residents, attendings, psychologists, social workers, care coordinators, and allied health professionals. Lyanna LaFredo MD and Lisa Durette MD will describe how embedding a PMHCA program within an academic medical center and graduate medical education environment supports both real-time patient care consultation and longitudinal professional education across disciplines and stages of training. Through case-based examples from the UNLV program, the session will highlight how PMHCA infrastructure enhances pediatric providers' confidence and competence in managing behavioral health concerns, facilitates integrated systems of care, and creates experiential learning opportunities that strengthen the pediatric behavioral health workforce while improving access to high-quality mental health services for children and adolescents.

Lisa Durette MD, DFAPA, DFAACAP
Associate Professor
Chair, Department of Psychiatry and Behavioral Health
Program Director, Child & Adolescent Psychiatry Fellowship
Director, NV PAL
Kirk Kerkorian School of Medicine at UNLV

Lyanna Joy LaFredo, MD
Assistant Professor, Department of Pediatrics
Kirk Kerkorian School of Medicine at UNLV

11:00am – 11:45am
Community Partnerships: Coordinating Across Health, Schools, Child Welfare and Juvenile Justice
Children with complex needs often interact with multiple systems operating independently. This session will explore system of care principles, wraparound care planning and partnership governance structures. Learn about data sharing, blended funding approaches, addressing system cultures working at cross-purposes and measuring collaborative impact. The speaker will examine power imbalances, centering family voice and recognizing that coordination requires dedicated infrastructure support.
Alicia Barnes, DO, MPH, FAPA, DFAACAP
Urban Child Institute Endowed Chair of Excellence in Child & Adolescent Psychiatry
Division Director & Chief of Psychiatry
Le Bonheur Children's Hospital

11:45am – 12:30pm
Financial Sustainability: Reimbursement, Value-Based Care and Diversified Funding
Pediatric behavioral health services operate on thin margins despite serving vulnerable populations. This session will explore optimizing fee-for-service reimbursement, value-based payment models including collaborative care codes and shared savings, and alternative funding including community benefit, grants and school partnerships. Learn about demonstrating value beyond direct revenue, cost containment strategies, advocacy for improved Medicaid reimbursement, and building business cases emphasizing population health value.
Heidi Baskfield
Vice President Mental & Population Health
Children's Hospital Association

12:30pm
Conference Concludes

12:45pm – 2:45pm
Workshop
Measuring What Matters: A Framework for Assessing Quality in Adolescent Substance Use and Behavioral Health Care

The need for access to adolescent substance use and behavioral health services continues to increase. In the effort to grow treatment networks to address this demand, measures of quality and outcomes often lag behind. This presentation will examine the importance of quality monitoring for treatment providers, health systems and payers. Attendees will become familiar with existing care standards as well as current gaps in national guidelines/care standards. This workshop will outline a framework to assess quality by incorporating HEDIS, ASAM Criteria, available treatment guidelines, insurance claims and clinical outcomes.

Michael Frost
Chief Medical Officer
Wayspring

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