# THE CONNECTICUT BEHAVIORAL HEALTH PARTNERSHIP cordially invites you to...

# "Putting Jt Together"

# An Overview of the newly expanded CT Behavioral Health Partnership & the Medicaid Fee for Service transition

Presented by the CT Department of Social Services (DSS), CT Department of Mental Health and Addiction Services (DMHAS), CT Department of Children and Families (DCF), HP Enterprise Services, and ValueOptions CT, the Administrative Service Organization of the Partnership.

CT Medical Assistance Program Providers are invited to attend an orientation to the expanded CT Behavioral Health Partnership, the joint DSS/DMHAS/DCF initiative designed to continue the reform of the public behavioral health service system for Fee for Service Medicaid clients. The presentation will offer introductions, contact information, and an overview of the Quality and Care Management programs. It will be followed by a question and answer session.

This orientation is specifically designed for Hospitals, Clinics, Home Health Agencies, Adult Group Homes, Methadone Clinics, Alcohol and Drug Centers, Psychiatrist, APRN and Psychologist Practitioners and Group Practices.

Date: Monday, February, 28, 2011

Time: 8:30 - 9:00 AM 9:00 - 10:00 10:00 - 10:15 10:15 - 11:30 11:30 - 12:00 PM Registration Overview/Presentation Break CT BHP Process/Presentation Q & A

Location: Crowne Plaza Hotel 100 Berlin Road Cromwell, CT 06416

Please fax the enclosed RSVP form to: 1 (860) 263-2036 Please RSVP by February 23<sup>rd</sup>, 2011 \*\*\*Space is Limited\*\*\* Maximum of 2 attendees per office/clinic/facility

## CT BEHAVIORAL HEALTH PARTNERSHIP FORUM RSVP FAX INFORMATION FORM

Please **fax** this RSVP form to: 1-860-263-2036 (No need for a cover letter)

#### Monday, February 28, 2011

## CROWNE PLAZA HOTEL 100 Berlin Road Cromwell, CT 06416

### \*\* RSVP Deadline: February 23rd, 2011 \*\*

Name: \_

(If more than one guest is attending from your organization, please complete a form for each guest.)

Title:	
(i.e. Offi	ce Manager, Clinical Director, Individual Practitioner, etc.)
Facility Name	/Practitioner Name (if applicable):
Practice/Facil	ity Address:
City/State/Zi	p Code:
Phone:	Fax:
E-mail:	
From South - From East -	rections Take Interstate 91 South (I-91 S) to exit 21 Cromwell/Berlin. Turn left off of the exit. Hotel is on the left. Take Interstate 91 North (I-91 N) to exit 21 Cromwell/Berlin. Turn left off of the exit. Hotel is on the left. Take Interstate 84 West (I-84 E). Merge onto I-691 East via exit 27 toward Meriden/Middletown. Merge onto I-91 N via Exit 11 on the left toward Hartford/Springfield. Take Interstate 84 East (I-84 E). Merge onto I-691 East via exit 27 toward Meriden/Middletown. Merge onto I-91 N via Exit 11 on the left toward Hartford/Springfield. Take Interstate 84 East (I-84 E). Merge onto I-691 East via exit 27 toward Meriden/Middletown. Merge onto I-91 N via Exit 11 on the left toward Hartford/Springfield. Take Interstate 84 East (I-84 E). Merge onto I-691 East via exit 27 toward Meriden/Middletown. Merge onto I-91 N via Exit 11 on the left toward Hartford/Springfield. Take I-91 N to exit 21. Turn left off of the exit. Hotel is on the left.