



## 31ST ANNUAL CASE MANAGEMENT CONFERENCE



Hard Rock Hotel & Casino –

1000 Boardwalk; Atlantic City, New Jersey 08401

**Conference Dates: September 29 - October 1, 2026**

The National Association of Case Management is requesting proposals for its 31st Annual Case Management Conference.

Proposals will be reviewed and selected by a committee designated by the National Association of Case Management Board of Directors.

### Conference Tracks

We are especially interested in presentations that focus on innovative, cost effective, evidence based, multi-disciplinary, and community-based case management services. Potential topics are included below. We also encourage your own unique topic submissions.

- Hot Topics
  - Artificial Intelligence
  - Safety in Work Place
  - Health & Wellness
  - Behavioral Health Topic
- Administration and Management
- Early Childhood and Youth Services
- Older Adult Services
- Case Management Skills
- Clinical Skills
- Peer Services
- Primary Care Case Management
- Trauma Informed Care
- People Operations

*Return proposals and address any questions to:*

**National Association of Case Management**

E-mail: [nacmcfp2026@sam-inc.org](mailto:nacmcfp2026@sam-inc.org)

Phone: 1-855-737-2223

**Proposal Deadline – April 24, 2026**

**Conference Co-Sponsored by**



# 2026 Call for Papers Application



## National Association of **Case Management**

**Please answer every question and attach all requested items.**

An online electronic version of this Call for Papers form is also available at [www.yournacm.com](http://www.yournacm.com).

1. Presentation Title:
  
2. Please attach the following:
  - ⇒ This completed **application** form
  - ⇒ **Outline** of presentation
  - ⇒ Three educational **objectives**
  - ⇒ **Resume** or Curriculum Vitae
  - ⇒ A **fivey (50) word abstract** using exact wording to be printed in the program (subject to editing)
  - ⇒ Presenter(s) **bio** in narrative form (100 words) and
  - ⇒ Presenter(s) **headshot/photo**
  
3. Which track best describes your proposal (page 2 of this packet)?
  
4. Proposed length of presentation (check one):  
 1 hour       1.5 hours       2 hours
  
5. Experience-level of audience (check one):  
 Introductory       Intermediate       Advanced       All Levels
  
6. When, where, and for whom has this presentation been previously offered?
  
7. Audio/visual and facility requirements: *Note: All rooms are equipped with a laptop, screen, LCD projector, flipchart, and markers. Presenters are strongly encouraged to use PowerPoint presentations (indicate additional needs).*  
 Access to internet connection       Audio to play a video       Other \_\_\_\_\_
  
8. Lead presenter/contact person:  
Name, degree/licensure \_\_\_\_\_  
Organization \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Office Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_
  
9. Co-presenters and panelists (Attach contact information for each additional presenter\*):  
Name, degree/licensure \_\_\_\_\_  
Organization \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Office Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

\*The National Association of Case Management recommends no more than 1 presenter per 1/2 hour of instruction, unless utilizing a panel discussion of persons served.

Agreement - In submitting this proposal, I/we understand that the National Association of Case Management is not offering to pay for this presentation, travel, lodging, meals, or other expenses associated with this conference. **Up to two presenters per workshop** will receive a 25% discount on their conference registration fee; **registration for the conference is required if the proposal is accepted**. If selected, I/we agree to present on the assigned date and time during the conference, September 29 - October 1, 2026, at the Hard Rock Hotel & Casino — 1000 Boardwalk, Atlantic City, NJ 08401. All applicants will receive written notification of acceptance or denial once submissions have been reviewed.

Signature of Presenter(s): \_\_\_\_\_

Please return proposals to : **National Association of Case Management**  
**E-mail:** [nacmcfp2026@sam-inc.org](mailto:nacmcfp2026@sam-inc.org)  
**Phone:** 1-855-737-2223

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