



Call for Session Proposals Submission Guidance

AMCP Managed Care & Specialty Pharmacy Annual Meeting 2017

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AMCP Managed Care & Specialty Pharmacy Annual Meeting 2017

Call for Continuing Pharmacy Education Session Proposals

The Academy of Managed Care Pharmacy (AMCP) invites proposals for continuing pharmacy education (CPE) sessions to be presented at AMCP Managed Care & Specialty Pharmacy Annual Meeting 2017, which will be held March 27-30, 2017, at the Colorado Convention Center in Denver, Colorado.

ABOUT THE AMCP MANAGED CARE & SPECIALTY PHARMACY ANNUAL MEETING

Annual Meeting 2017 is expected to attract approximately 3,000 managed care pharmacists and other health care professionals seeking to increase their knowledge of the management and coordination of clinical, pharmacy benefit, and pharmacy care programs. These managed care professionals are interested in health care information and issues viewed from a population perspective, rather than at the patient–practitioner level.

CPE SESSION SPECIFICS

CPE sessions at *Annual Meeting 2017* will be 1.25 hours long (75 minutes). To accommodate introductions, housekeeping information, and some question and answer time, **actual content should be 60 minutes**.

CPE session proposals MUST focus on one of the topics listed below and proposed content should be appropriate for the specified education track. Topics are divided into six different tracks. Beneath each topic are potential learning objectives of the session you may want to consider when developing your proposal.

Proposals submitted outside of these topic areas will not be considered for inclusion. Preference will be given to proposals that highlight real-world examples of innovations in managed care, share outcomes data, and/or include information of interest to pharmacists, physicians, and nurses.

Track: Business Trends in Managed Care

Session Topics with Potential Learning Objectives

Marketplace stability and profitably- financial impact of the Affordable care act and exchanges on health plans

- Describe the fiscal and regulatory challenges that health plans face when trying to manage a Marketplace plan.
- Describe the impact on competition and number and kinds of competitors.
- Discuss the correlation of pharmacy use in high-risk members and members who do not utilize any services in the exchanges. Describe how managed care can better identify and conduct outreach to these members.
- Discuss lessons learned and best practices health plans have garnered from working with exchanges.
- Explain how to strategize a successful exchange program.

Practical solutions to the health care affordability crisis – Evolution story

- Describe the key drivers that have impacted today's health care market.
- Describe what current day practices employed by different health care stakeholders are and are not sustainable.
- Describe how the health care industry will pay for health care benefits on a national scale going forward.
- Identify elements of benefit design that may need to be altered.
- Explain how we can leverage smart technology to effect positive change.
- Identify factors contributing to increasing premiums and rising drug prices, especially for generics.
- Describe what managed care pharmacy is doing to control costs (e.g. higher out of pocket, cost shifting).
- Describe the potential impact on quality measures, adherence, and patient outcomes.
- Discuss the side effect of treatment decisions (financial toxicity of treatment decisions).
- Describe how health care affordability can be impacted from a policy perspective.

Copay assistance programs/drug coupons- potential specialty pharmacy focus

- Discuss management strategies health plans and PBMs have developed to address challenges with patient assistance programs.
- Describe how these assistance programs impact actuarial models and underwriting, so that they are more accurate.
- Discuss the challenges in collecting and reporting data related to out-of-pocket spends reported to Medicare Part D and prior authorizations.
- Discuss how to increase health care accessibility and affordability for patients in need.

Transpacific partnership implication to the US health care market – impact on generic approvals, and drug costs

- Describe the current status of the TPP.
- Discuss the potential financial, competitive, and medication access impact.
- Discuss how the TPP may impact different health care stakeholders, including payers.

Track: Current Affairs in Specialty Pharmacy Management

Session Topics with Potential Learning Objectives

Development of independent specialty pharmacies and small pharmacies servicing high costs/high return patients

- Identify the newer players interested in gaining access to restricted distributions.
- Discuss how health plans are managing specialty pharmacies in their systems.
- Describe how to address challenges faced by plans when specialty pharmacies subcontract with community pharmacies.
- Discuss health plan approaches to managing independent pharmacies that fall outside of a payer's network of specialty pharmacy providers.

Oncology- e.g. malignant melanoma, multiple myeloma, non-small cell lung cancer

- Describe differential outcomes around different tumor types.
- Discuss the implications of combination therapies.
- Discuss best practices to formulary management.

Pharmacogenomics and oncology

- Describe the importance of pharmacogenomics in the management of specific cancers.
- Explain how pharmacogenomics is being used clinically in patient care.
- From a payer perspective, summarize the operational challenges when implementing a pharmacogenomics program and how these can be mitigated.

Multiple Sclerosis

- Identify newer therapies and drugs in the pipeline.
- Summarize current treatment guidelines.
- Describe the impact of newer therapies on patient outcomes.
- Describe how health plans and PBMs are managing costs associated with MS.

Cystic fibrosis

- Identify newer therapies and drugs in the pipeline.
- Summarize current treatment guidelines.
- Describe the impact of newer therapies on patient outcomes.
- Describe how health plans and PBMs are managing costs associated with cystic fibrosis.

Revisiting cost per quality adjusted life years (QALY)

- Describe how to assign a number to this metric based on disease state and patient perspective.
- Discuss how QALY is being used successfully to manage population health.
- Discuss the role of QALY in helping assess high priced treatments using a case study.

Update on the state of high cost disease states post-launch of new therapies: e.g. Hep C, RA, PCSK9i.

- Describe best practices in contracting for these high cost diseases.
- Describe the real world outcomes to date.
- Describe how payers' approach to management of high-cost drugs upon initial release has changed for disease states in which payers are not seeing the promised patient outcomes.

Hepatitis C-specific:

- Describe the impact of newer therapies on real world infection rates and 100 percent cure rates in Hep C.
- Describe how new approvals (pan-genotype HCV) have changed payers' approach to this category, if at all.

PCSK9i-specific:

- Identify the types of outcomes being utilized for PCSK9 inhibitors.
- Describe how rebates and outcomes contracting have worked for this class of drugs.

Overview of Asthma treatment

- Describe how newer therapies are impacting the management of asthma.
- Summarize updates to existing guidelines for management.
- Identify agents in the pipeline and their potential role in asthma management.

Track: Research and Its Practical Application

Learning objectives to consider

Predictive Analytics (with case examples of specific diseases)

- Explain how payers can identify appropriate patient predictors or risk factors.
- Discuss best practices for the application of predictive analytics at health plans and PBMs.
- Discuss outcomes observed from the utilization of predictive analytics in the real world.

Application and operationalization of health economics and outcomes research (HEOR)

- Describe the application of HEOR within different settings (e.g. medical group, hospital, vs health plan or PBM), disease states, and drugs.
- Discuss the challenges and opportunities in applying and operationalizing HEOR.
- Describe future uses of HEOR.

Applying comparative effectiveness research (CER)/ tool-

- Describe how to make a comparison between two or more randomized controlled-trials against a placebo using the CER tool.
- Discuss how CER research is currently impacting formulary decision-making.
- Discuss how to best communicate findings from CER studies.

Biosimilars- current state; European data and domestic data

- Discuss the safety and efficacy outcomes to date with the use of biosimilars.
- Summarize the response to and uptake of biosimilars to date by different stakeholders (payers vs. hospitals vs. specialty pharmacy vs. distributor vs. patient group).
- Describe the impact/role of biosimilars across different lines of business.
- Discuss the process by which plans are making formulary-decisions in regards to biosimilars.

Patient Reported Outcomes (PROs)- case study in oncology or other specialty diseases

- Identify the types of data being collected by health plans.
- Describe the quality of this data.
- Describe how this data is being used by health plans in the decision-making process.
- Describe some of the challenges observed with collecting and using PROs.
- Identify measures that can help standardize PROs.
- Describe how plans use PROs in the decision-making process.
- Describe how patients can be incentivized to participate in data reporting.
- Describe how manufacturers are including PROs in clinical trials.
- Describe how plans/payers evaluate and view PRO data.

Track: Spotlight on Formulary Management

Learning objectives to consider

ePA/ eprescribing update – standards update

- Discuss the update guidance.
- Identify stakeholders implementing changes.
- Describe how ePA and eprescribing are being integrated.
- Describe how pharmacy benefit information is being integrated into EHRs and EMRs.

Medical marijuana

- Discuss the data and evidence of impact on health care costs and outcomes (e.g. decrease in opioid related deaths, drunk driving incidents).
- Review appropriate use and management strategies.
- Describe the role of health care professionals in recommendation and documentation.
- Discuss whether managed care pharmacy should cover costs associated with medical marijuana.
- Discuss the effect of medical marijuana use on other drugs such as heroin and oxycontin.

State of formulary management- PA, step therapy, pathways, exclusionary lists, benchmarking

- Describe how well these formulary management tools are working.
- Identify lessons learned to date.
- Discuss how health plans and PBMs are optimizing formulary management.

Value frameworks

- Describe how applicable value frameworks are to rare diseases.
- Discuss the role of value frameworks in precision medicine.

Mobile health and other new technologies- e.g. mobile health, management tools, pump add-ons

- Describe how health plans are evaluating HIT approved by FDA as "drugs."
- Identify the organizations evaluating this type of HIT (e.g. is there an ICER-like organization?)
- Identify the resources available for up-to-date information and evaluation of this HIT.
- Identify the patient demographic using this HIT.
- Review patients' perception of value and rate of use.

New drug therapies in congestive heart failure (CHF)- evidence and place in formulary

- Identify new therapeutic agents to treat CHF.
- Summarize the evidence on newer therapies for CHF.
- Discuss formulary implications of new agents.

Results and Relevance of diabetes outcomes trials (EMPA-REG OUTCOME and LEADER trial), ongoing trials

- Identify the baseline for patients in these trials.
- Describe the results and conclusions of these trials.
- Discuss how these trials will impact diabetes medication/ disease state management.

Track: Staying on Course with Legislative and Regulatory Issues

Learning objectives to consider

340 B

- Summarize the current landscape of 340B programs and how they impact health systems and payers.
- Discuss strategies payers can use to address challenges faced with 340B programs.
- Explain new proposed regulation on 340B drug pricing programs

Compounding- the status of excluding ingredients

- Summarize the laws surrounding pharmacy compounding and pricing.
- Discuss the current challenges payers are facing with regards to compounding of medications.
- Explain at least two best practices used by payers to assist in managing the compounding drug spend.

Medicaid expansion

- Summarize the current state of Medicaid expansion.
- Describe the role of managed care.

Medicare buy-in update

- Summarize the current state post-presidential election.
- Discuss the future of Medicare buy-in.

Medicare Part D/ B (specialty)

- Summarize updates on reinsurance, high cost drugs, donut hole, and cost sharing.
- Describe the potential impact of the new Medicare Part B reimbursement regulations.

Impact of state mandated formularies in Medicaid

- Discuss cost and utilization differences between state-defined formularies and plan managed formularies.

Track: The Landscape of Contemporary Managed Care Pharmacy

Learning objectives to consider

Ethics in health care decision-making with terminally ill patients

- Summarize the ethical and practical challenges in health care decision-making with terminally ill patients.
- Describe the process of informed decision-making to appropriately manage terminally ill patients.
- Discuss strategies to better help manage and increase the quality of life for end of life patients.
- Discuss outcomes seen in a real world hospice program.

MTM

- Summarize recent updates on the SNOMED codes.
- Discuss evidence on the eMTM model.

Impact of health care literacy on patient outcomes

- Identify the health care literacy differences across different therapeutic areas and clinical populations.
- Discuss how health care providers can appropriately level set patient expectations of health outcomes.
- Summarize tools currently available to help support health literacy efforts.

The impact and future of telemedicine

- Summarize the current landscape of telemedicine.
- Describe evidence and results from a real world program.
- Discuss evolution and future opportunities.

Proposal Submission Requirements

CPE session requirements

All CPE sessions are expected to adhere to the enclosed *Guidelines for Continuing Pharmacy Education Sessions* and incorporate all of the elements discussed in that document. All presentations must:

- Incorporate at least one active learning activity for each learning objective.
- Have a PowerPoint Presentation on AMCP's template whose content achieves all learning objectives.
- Have an associated handout (consisting minimally of copies of PowerPoint slides).
- Be based on and reference the best available evidence.
- Give a balanced view of therapeutic options.

Faculty remuneration

Faculty associated with accepted CPE session proposals will receive:

- One complimentary AMCP Managed Care & Specialty Pharmacy Annual Meeting 2017 registration.
- Reimbursement of reasonable speaking-related travel expenses at the discretion of AMCP (i.e., round-trip coach airfare, ground transportation, and one night hotel stay).

Typically, a 1.25-hour continuing pharmacy education session should have no more than two faculty. Sessions conducted primarily as short presentations plus panel discussion should have no more than four faculty total (facilitator plus three panelists). AMCP reserves the right to limit the number of faculty in a session or the type and amount of remuneration provided. AMCP also reserves the right to conditionally proposals with certain modifications to content and faculty.

How to submit a proposal

Proposals must include *all* of the requested elements. **Submissions MUST indicate the specific topic that the session will cover based on the list provided by AMCP.**

If the proposed session has multiple faculty, one person should be designated as the session coordinator. If the proposal is accepted, this person will serve as the main liaison with AMCP and will be responsible for ensuring that all requested information is submitted in a timely manner.

Deadline

Proposals must be submitted no later than 11:59 pm ET on Tuesday, October 11, 2016.

Evaluation of proposals

CPE Proposals will be evaluated by the AMCP education staff and Educational Affairs Committee.

Notifications of acceptance will be sent no later than Friday, December 9, 2016.

Questions?

Please direct questions to Michelle Perkins, Education Program Coordinator, at (703) 684-2612 or via email to mperkins@amcp.org.

Please note, results of original research must be submitted via the Call for Abstracts, which will open October 7, 2016 (tentative).

ACPE Guidelines for Continuing Pharmacy Education

Learning assessment with feedback

Current Accreditation Council for Pharmacy Education (ACPE) Accreditation Standards for Continuing Pharmacy Education (CPE) activities require that CPE programs include learning assessments “to allow pharmacists to assess their achievement of the learned content.” In addition, learning assessment feedback “must be provided to participants in an appropriate, timely, and constructive manner.”

To comply with this requirement, AMCP requires speakers to **include at least one learning assessment question for each learning objective**. We encourage you to use a pre-test/post-test format, with correct responses provided and discussed as part of the post-test. We further encourage you to take advantage of the audience response system that will be available for all CPE sessions. Additionally, AMCP requires session participants to provide at least one item they learned during the session in their session evaluation.

Specifically:

- Create at least one multiple-choice question for each of the learning objectives addressed in your presentation (or in your section of the presentation). **Each question should have four responses; only one response should be correct.**
- Show these slides at the beginning of the presentation and ask participants to indicate the correct response. **Do not provide or discuss the answers at this time.**
- Show the slides again at the end of presentation, again asking participants to indicate the correct response. At this time, reveal the correct answer, explain why it is correct, and ask participants if they have any questions.

Be sure to indicate the correct response to each post-test question in your PowerPoint file. AMCP will remove the correct responses from the presentation file.

Active learning during presentations

Current ACPE Accreditation Standards require that CPE programs include “learning activities to foster active participation.” To comply with this requirement, AMCP requires speakers to **include at least one active learning activity for each learning objective**.

Although you may incorporate any type of active learning activity that may be appropriate for your presentation, we encourage you to take advantage of the audience response system that will be available for all CPE sessions. At several points during your presentation, incorporate slides that ask participants to provide input such as:

- Selecting the correct response to a true/false or multiple-choice question.
- Indicating agreement/disagreement with a statement or prediction.
- Providing demographic or other polling information [e.g., “Are you a (a) pharmacist, (b) nurse, (c) physician, (d) none of these?”].

Handout

Current ACPE Accreditation Standards require CPE providers to offer educational materials for all programs. Educational materials may consist of handouts, outlines, background material, selected bibliographies, or other resources that “serve as a guide, provide additional sources of information, and include reference tools usable in practice.”

To comply with this requirement, AMCP will create a PowerPoint handout from your final slide file. Handouts will be posted to the meeting website no later than 1 week before the conference begins.

You are welcome and encouraged to provide additional materials for posting (reference list, forms, checklists, etc.) However, please note that **no printed materials may be distributed to session attendees** unless the materials are approved in advance by AMCP.

Equitable and fair balance

According to current ACPE Accreditation Standards, the content or format of CPE activities “must promote improvements or quality in health care and not a specific proprietary business interest of a commercial interest.” Presentations are expected to give a balanced view of therapeutic options:

- Recommendations or emphasis must fairly represent, and be based on, a reasonable and valid interpretation of the information available on the subject (e.g., “On balance the data support the following ...”).
- No single product or service should be over represented in the CPE activity when other equal but competing products or services are available for inclusion.
- Generic names should be used preferentially; trade names may be used in addition to generic names but not in place of generic names. If the CPE educational material or content includes trade names, all available trade names should be used, not just trade names from a single company.
- All speakers will be required to complete a financial disclosure form. If any conflict of interest is perceived based on the information provided, slides will be peer-reviewed to ensure there is no bias in the presentation.
- All information should be referenced using best available evidence including tables, statistics, and data. In addition, permission must be obtained to use any copyrighted material.

Presentation review

Faculty members are expected to submit a PowerPoint slide deck on AMCP’s slide template whose content achieves all learning objectives. All instructional materials for continuing education sessions will undergo an intensive review process to ensure that they meet the established learning objectives and comply with AMCP requirements and current ACPE Accreditation Standards. We will contact you at the conclusion of this review if any needed changes are identified.

Measurable Action Verbs for Continuing Pharmacy Education Activities*

***Note:** Knowledge-based activities should only use verbs classified as knowledge-based. Application-based activities may use a mix of verbs classified as knowledge-based and application-based; however, the majority should be application-based.

Knowledge-Based

Arrange	Label	Relate
Classify	List	Repeat
Define	Locate	Report
Describe	Memorize	Reproduce
Discuss	Name	Restate
Duplicate	Order	Review
Explain	Outline	Select
Express	Recall	State
Identify	Recite	Summarize
Indicate	Recognize	Translate

Application-Based

Cognitive Domain (Bloom)

Analyze	Design	Practice
Apply	Develop	Predict
Appraise	Differentiate	Prepare
Argue	Discriminate	Propose
Arrange	Distinguish	Question
Assemble	Dramatize	Rate
Assess	Employ	Research
Attach	Estimate	Schedule
Calculate	Examine	Select
Categorize	Experiment	Set up
Choose	Evaluate	Sketch
Collect	Formulate	Solve
Compare	Illustrate	Support
Compose	Interpret	Teach
Construct	Investigate	Test
Contrast	Judge	Use
Create	Manage	Write
Criticize	Operate	
Defend	Organize	
Demonstrate	Plan	

Psychomotor Domain (Dave)

Adapt	Execute	Observe
Adhere	Follow	Practice
Build	Formulate	Perfect
Calibrate	Identify	Perform
Combine	Imitate	Recreate
Complete	Implement	Reenact
Construct	Improve	Repeat
Control	Integrate	Replicate
Coordinate	Invent	Show
Copy	Manage	Solve
Demonstrate	Master	Specify
Design	Mimic	Teach
Develop	Modify	Try

Affective Domain (Bloom)

Act	Formulate	Qualify
Adhere	Generalize	Question
Aid	Give	Read
Alter	Greet	Recite
Answer	Help	Relate
Arrange	Hold	Reply
Ask	Identify	Report
Assist	Influence	Revise
Attach	Initiate	Select
Choose	Integrate	Serve
Combine	Invite	Share
Compare	Join	Site
Complete	Justify	Study
Comply	Label	Solve
Conform	Listen	Synthesize
Defend	Locate	Tell
Demonstrate	Modify	Use
Describe	Name	Verify
Differentiate	Order	Work
Discriminate	Organize	Write
Discuss	Point to	
Display	Practice	
Erect	Perform	
Explain	Prepare	
Follow	Present	
Form	Propose	

