



Call for Education Session Proposals Submission Guidance

AMCP Managed Care & Specialty Pharmacy Annual Meeting 2018

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AMCP Managed Care & Specialty Pharmacy Annual Meeting 2018

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 2018, which will be held April 23-26, 2018, at the Boston Convention and Exhibition Center in Boston, Massachusetts.

ABOUT THE AMCP MANAGED CARE & SPECIALTY PHARMACY ANNUAL MEETING

Annual Meeting 2018 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 2018* 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. Accompanying each topic are recommended learning objectives 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

#	Topic	Recommended Learning Objectives
1	Assessing feasibility of Value Based Contracts	<ol style="list-style-type: none"> 1. Identify the barriers to implementing value based contracts. 2. Discuss the feasibility and value to both manufacturers and payers as per current practices and trends in establishing value based contracts. 3. Discuss the outcomes and lessons learned from a payer on overcoming barriers and implementing a value based contract. 4. Discuss how to evaluate success of a value based contract.
2	Outcomes in pay for performance in managed Medicaid	<ol style="list-style-type: none"> 1. Discuss a successful implementation of a pay for performance program of a managed Medicaid plan. 2. Discuss the opportunities that exist for implementing pay for performance programs for managed Medicaid plans.
3	Managing the overflow: Generic drug management strategies	<ol style="list-style-type: none"> 1. Discuss best practices in monitoring the generic drug landscape. 2. Identify generics with the biggest predicted impact on cost. 3. Discuss payer strategies for formulary decision-making for upcoming authorized generics, highly inflated generics, and specialty generics. 4. Determine how to transition patients from expensive generics to lower cost opportunities. 5. Discuss the FDA's plan/strategies to overcome current challenges in generic approvals.
4	Role of accountable care organizations and integrated delivery networks on health care delivery and quality	<ol style="list-style-type: none"> 1. Explain the impact and outcomes of health care delivery through accountable care organizations (ACOs) and integrated delivery networks (IDNs) on quality measures. 2. Discuss best practices and lessons learned from ACO/IDN delivery strategies to improve quality.
5	Novel approaches to coordinating pharmacy vs medical spend on medication management	<ol style="list-style-type: none"> 1. Discuss a real world case study of a payer who shifted medication management away from the medical spend. 2. Discuss the impact of increased medical benefit utilization management on improving or changing care. 3. Discuss the role of value based contracts and gene therapy. 4. Discuss strategies payers are using to manage disease states, like rheumatoid arthritis, multiple sclerosis, rare diseases/ orphan drugs, or oncology, where drug spend may span across the pharmacy and medical benefit.

6	Impact of mergers and acquisitions across the health care spectrum	<ol style="list-style-type: none"> 1. Describe the impact of consolidation, like mergers and acquisitions, across different stakeholders in health care (e.g. health plans, PBMs, provider groups, hospital systems, manufacturers, etc). 2. Discuss how consolidation impacts normal business and daily work for managed care professionals. 3. Identify the "winners and losers" in this fiscal climate.
7	Seismic Shift: The new, unconventional players in the health care industry	<ol style="list-style-type: none"> 1. Identify some of the new, unconventional players in the health care industry. 2. Discuss the impact and seismic shift due to disruption and innovation in the pharmacy space, especially impact on payers.
8	Marketplace stability and profitably- focus on exchanges	<ol style="list-style-type: none"> 1. Describe the challenges that health plans face when trying to manage a Marketplace plan when it is often a financial loss for them given the requirements. 2. Describe the impact on competition and kinds of competitors. 3. Discuss lessons learned and best practices health plans have gained from working within the exchanges. 4. Discuss the future of exchanges with so many big payers pulling out. 5. Discuss the impact of potential health care reform on the exchanges and MCP industry (e.g. repeal and replace, removal of individual mandate)

Track: Current Affairs in Specialty Pharmacy Management

#	Topic	Recommended Learning Objectives
1	Innovations in oncology management (focus on cancers with most development: e.g. breast cancer, ovarian cancer, NSCLC, bladder/urothelial)	<ol style="list-style-type: none"> 1. Define CRISPR/CAR-T therapies and their place in therapy. 2. Discuss the impact of novel therapies and therapies with new indications/ place in therapy, especially on pathways. 3. Identify therapeutic areas with potential for management. 4. Discuss implementation strategies and hurdles for managing a specific cancer type.
4	Precision medicine in oncology	<ol style="list-style-type: none"> 1. Differentiate precision medication vs traditional oncolytics. 2. Discuss how precision medication in oncology will impact traditional management of oncology therapies
5	Oncology cost trends and management	<ol style="list-style-type: none"> 1. Discuss real world data on the total cost of oncology care. 2. Discuss pharmacy and medical benefit cost trends across various lines of business. 3. Determine appropriate algorithms of care in oncology to optimize use of cost-appropriate therapies. 4. Discuss economic impact assessment of emerging management tools and care models (e.g. for which cancers are these established? How does a plan implement, usually at the provider level, today?)
7	Analysis of the gene therapy landscape	<ol style="list-style-type: none"> 1. Discuss the therapeutic areas that are targeted for gene/genetic therapy interventions. 2. Identify the gene therapy agents in the market place and pipeline (e.g. RNA viral vectors, gene splicing, etc). 3. Review basic knowledge of these agents like mechanism of action, size of population, specific gene defect targets. 4. Identify the best resources for research and information. 5. Discuss lessons learned from the European experience.
5	The Economics of Gene Therapy	<ol style="list-style-type: none"> 1. Discuss pharmacoeconomic models payers can consider to pay for genetic treatments.

		<ol style="list-style-type: none"> Analyze current management strategy for gene therapy used by payers. Discuss lessons learned from the European experience. Discuss the value proposition for payers.
6	Patient reported outcomes	<ol style="list-style-type: none"> Discuss current practices in patient reported outcomes (PROs) data collection and utilization for continued management. Discuss how health plans are utilizing PRO's to change formulary management. Discuss how PROs are evaluated in conjunction with other clinical data/evidence for a drug's formulary placement.
7	Discuss the role of specialty pharmacies in patient access	<ol style="list-style-type: none"> Discuss how specialty pharmacies are impacting patient access to medications. Discuss what kinds of data specialty pharmacies are sharing with manufacturers, and how this impacts health plans. Discuss the role of supply chain management, specialty network design, HUB chain design, and patient services compliance.
5	Management of rare diseases and orphan drugs across pharmacy and medical benefits	<ol style="list-style-type: none"> Discuss the actuarial experience thus far with high cost specialty drugs for rare diseases. Discuss the site of care limitations for management of rare diseases. Identify rare diseases that would benefit from different types of coverage management. Discuss strategies and best practices payers are using for formulary management and cost containment of rare diseases and orphan drugs where drug spend may span across the pharmacy and medical benefit. Describe how value proposition for rare diseases may impact coverage.
6	Treatment advances in rare diseases- e.g. Batten Disease, Duchenne muscular dystrophy, Merkel Cell Carcinoma)	<ol style="list-style-type: none"> Review treatment advances in rare diseases. Discuss likely place in therapy of new drug agents for rare diseases. Discuss formulary challenges and opportunities for payers.
7	Biosimilars pipeline and the formulary impact	<ol style="list-style-type: none"> Identify new agents in the biosimilars pipeline.

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2. Discuss legislative and regulatory changes impacting the biosimilars landscape, especially in regards to surveillance.
 3. Discuss contracting strategies for biosimilars in the pipeline (e.g. indication based pricing/formularies).
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Track: Research and Its Practical Application

#	Topic (to be included in Call for Proposals)	Scope of Session- <i>Include 2 to 3 learning objectives</i> (to be included in Call for Proposals)
1	Best uses of predictive analytics-innovations	<ol style="list-style-type: none"> 1. Explain how payers can identify appropriate patient predictors or risk factors. 2. Identify key data elements in successful predictive analytics. 3. Discuss best practices applying and operationalizing predictive analytics at health plans and PBMs. 4. Discuss the outcomes observed from the utilization of predictive analytics in the real world.
2	Big new world of data- Can we finally see how treatments work in the real world?	<ol style="list-style-type: none"> 1. Discuss how payers can maximize the ever-evolving data available through EMR and other technologies to impact knowledge of real world treatment. 2. Identify examples of patient populations where payers have learned more about a treatment real time vs. retrospective analysis.
3	Real world evidence collaborations (payers/manufacturers)	<ol style="list-style-type: none"> 1. Discuss and provide examples of how payers use real world evidence. 2. Discuss best practices for payer and manufacturer collaborations on research. 3. Discuss how stakeholders can find common goals/incentives and establish the value for research together. 4. Identify where the most pressing needs are for RWE.
4	Value frameworks – utilization in MCP decision making	<ol style="list-style-type: none"> 1. Discuss innovations in value frameworks. 2. Discuss the role of value frameworks in precision medicine. 3. Discuss measures used, success, and outcomes in value based formulary. 4. Discuss and evaluate different value based formulary management methods using real world evidence.
5	Developing and designing pragmatic, adaptive, and bucket clinical trials	<ol style="list-style-type: none"> 1. Define pragmatic, adaptive and bucket clinical trials. 2. Discuss the best usage of each clinical trial design.

3. Explain how to develop and design different clinical trials.

Track: Spotlight on Formulary Management

#	Topic (to be included in Call for Proposals)	Scope of Session- <i>Include 2 to 3 learning objectives</i> (to be included in Call for Proposals)
1	Managing the new wave of hepatitis C treatments	<ol style="list-style-type: none"> 1. Identify the newly appropriate patients for treatment with HCV therapies. 2. Determine the appropriate management of those who experience relapse and require retreatment. 3. Identify new treatment agents and their place in therapy.
2	Managing Rheumatoid arthritis (RA)	<ol style="list-style-type: none"> 1. Review the different treatment approaches to RA (e.g. combination therapy, triple therapy, biologics) 2. Discuss the place in therapy and formulary management strategies for agents used in RA, especially triple therapy. 3. Discuss the utilization and cost management strategies for RA agents.
3	Holistic formulary management	<ol style="list-style-type: none"> 1. Discuss formulary management techniques by drug type (e.g. generics, high cost generics, non-specialty brands, specialty drugs). 2. Discuss the effectiveness of different formulary management tools based on real world evidence (PAs, step therapies, tiering, etc)
4	Patient cost sharing- “financial toxicity”	<ol style="list-style-type: none"> 1. Discuss the impact of cost sharing on patients and payers. 2. Compare different cost-sharing structures and what impact it had on members being able to afford medications and stay adherent to them 3. Discuss payer strategies to copay coupon cards.

Track: Staying on Course with Legislative and Regulatory Issues

#	Topic (to be included in Call for Proposals)	Scope of Session- <i>Include 2 to 3 learning objectives</i> (to be included in Call for Proposals)
1	Combating the opioid epidemic: real world outcomes of abuse deterrent opioids, lock-in programs, and short fills	<ol style="list-style-type: none"> 1. Discuss the federal and state legislative and regulatory landscape impacting opioid management, including the Comprehensive Addiction and Recovery Act. 2. Describe how abuse deterrent opioids utilization, lock in programs, and short fills have impacted overall medical utilization patterns. 3. Discuss how payers can select appropriate patients for inclusion in a lock-in program 4. Evaluate the approaches plans can take to manage short acting opioids in light of legislation changes. 5. Determine the impact of “splitting” an opioid C-II prescription.
2	What will the 21 st Century Cures Act mean for managed care pharmacy?	<ol style="list-style-type: none"> 1. Discuss how the 21st Century Cures Act may impact new drug approvals. 2. Discuss how payers can prepare for drugs that may be approved through the act.
3	Impact of state laws on managed care pharmacy	<ol style="list-style-type: none"> 1. Review state laws impacting managed care pharmacy comprehensively (e.g. specialty tiering, max copays, definitions for specialty drugs, etc).

Track: The Landscape of Contemporary Managed Care Pharmacy

#	Topic (to be included in Call for Proposals)	Scope of Session- <i>Include 2 to 3 learning objectives</i> (to be included in Call for Proposals)
1	Evaluating and managing new approvals with less clinical data	<ol style="list-style-type: none"> 1. Discuss the FDA's rationale and approach for approving some drugs with less evidence. 2. Discuss the impact of these new practices (e.g. What might be the unintended consequences of increase in orphan drug status products on the market? What follow up is in place to ensure that use of products in orphan disease are monitored?) 3. Discuss approaches payers can take to ensure the appropriate level of evidence for drugs approved through the FDA with less evidence. 4. Discuss how payers can appropriately manage therapies that have limited information based on approval.
2	Blockchain technology and alternative payment models- high level	<ol style="list-style-type: none"> 1. Define blockchain technology. 2. Discuss the potential role of blockchain technology in managed care. 3. Discuss the impact blockchain technology may impact have on interoperability and data privacy, etc.
3	Highlighting advances in Population Health	<ol style="list-style-type: none"> 1. Identify innovations in population health management. 2. Highlight positive impacts of population health programs. 3. Discuss how real world data can be leveraged by population health to guide care. 4. Discuss best practices and strategies that can help promote healthy outcomes, like preventive health care, medication management, discharge follow-up. 5. Discuss the pharmacist's role and impact in improving overall population health.
4	Collaborative practice agreements within pharmacy	<ol style="list-style-type: none"> 1. Summarize the evolution of the pharmacy profession. 2. Discuss how pharmacists can be better utilized by way of collaborative practice agreements.
5	Mobilizing patients towards healthy actions	<ol style="list-style-type: none"> 1. Discuss how to communicate with and engage patients in healthy behaviors (e.g. preventive health, getting a flu shot, etc) 2. Discuss innovations in improving patient adherence to medications.

6	Rapid Learning Systems	<ol style="list-style-type: none">1. Discuss the challenges and opportunities of rapid learning systems in the health care industry.2. Discuss the key elements necessary in establishing a robust rapid learning system.3. Discuss how payers can promote rapid learning in their organizations.

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 2018* 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 three faculty total (facilitator plus two 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 PT on Thursday, October 26, 2017.

Evaluation of proposals

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

Notifications of acceptance and rejection will be sent no later than Friday, December 15, 2017.

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 November 8, 2017.

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