CALL FOR SESSION PROPOSALS

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ABOUT AMCP NEXUS 2020

We continue to plan and look forward to AMCP Nexus 2020 from Oct. 20-23 at MGM in Las Vegas. AMCP is working closely with Las Vegas officials and reviewing the latest guidance from public health authorities and will adjust accordingly, if needed.

Today's health care climate spurs innovation. Share your thought-leadership with nearly 2,500 managed care pharmacists and health care professionals who are expected to attend AMCP Nexus 2020 and are eager to advance their professional learning alongside peers and experts.

CPE SESSION SPECIFICS

CPE sessions at AMCP Nexus 2020 will be 75 minutes. To accommodate introductions, housekeeping information, interactivity and question and answer time, actual content should be no more than 60 minutes.

Topics are divided into five different tracks:

- Drugs, Diseases and the Managed Care Impact
- Legislative and Regulatory Trends
- Managed Care Research in Action
- Specialty Management
- Making the Way for Innovation

Proposed content should be appropriate for the specified education track above. In addition, CPE session proposals MUST focus on one of the topics listed in **Appendix A.** Accompanying each topic are questions you may want to consider when developing your proposal.

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CPE SESSION REQUIREMENTS

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

- Incorporate active learning activity for each learning objective.
- Have a PowerPoint Presentation on AMCP's template with content that 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 and/or programs and services.

FACULTY REMUNERATION

Faculty associated with accepted CPE session proposals will receive:

- One complimentary AMCP Nexus 2020 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 75-minute 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 accept proposals and can recommend certain modifications to content and faculty.

HOW TO SUBMIT A PROPOSAL

Proposals must include ***ALL*** the requested elements found within the online form. Submissions MUST indicate the specific topic that the session will cover based on the list provided by AMCP.

Fields included on the online form are the following:

A. Confirmed Faculty

Please provide a list of confirmed faculty for the session. These faculty members agree to speak at AMCP Nexus 2020 and are available during the conference dates. AMCP will not review or accept proposals where faculty have been invited but not confirmed.

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.

B. Proposal Title

A proposal must have a short, specific presentation title (containing no abbreviations) that indicates the nature of the presentation

C. Needs Assessment/Knowledge Gap Information

Provide a description (at least 300 words) of why the topic addressed in the proposed session is important to managed care pharmacists, as well as the "knowledge gap" that the session will fill: what is happening now versus what is needed and desired in practice? What problems are caused by the current status/behaviors/practices? What benefits would result from the desired status/behaviors/practices?

Include a minimum of three citations to published information or evidence, preferably national guidelines, peer-reviewed health care literature, regulatory requirements, or similar expert/authoritative sources.

D. Session Description

Create a brief (no more than 150 words) session description suitable for inclusion on the AMCP Nexus 2020 website. The description should reflect the session content accurately and be worded in a way that entices the audience to attend.

Example: Biosimilars: Regulatory Considerations and Controversies — Although the first biosimilar product is not expected to hit the U.S. market before 2017, federal and state governments already are moving ahead with guidance and regulations. The naming debate is in full swing. There are many questions about the approval process for biosimilars in Europe and how it might influence an approval pathway in the United States. The FDA has floated the idea of an "Orange Book" for biosimilars. Which version of the future seems most likely? This session will provide perspective on the activity and speculation regarding regulation of biosimilars.

E. Detailed Program Agenda

Indicate what information will be covered by each faculty presenter and for how long.

F. Learning Objectives

Provide at least three measurable, specific learning objectives that define what pharmacists should be able to do at the completion of the proposed session. The objectives should address the identified needs and knowledge gap. They also should elicit or describe observable or measurable behaviors on the part of participants.

Learning objectives should begin with a verb and complete the sentence, "At the completion of this activity, participants should be able to …." The verbs should be appropriate for the proposed session activity type (knowledge-based or application-based), as indicated in **Appendix B**.

For example, for a knowledge-based activity for the session description above, the following objectives are appropriate:

At the completion of this activity, participants should be able to:

1. *Explain the differences between FDA regulation of biosimilars and the European Union approach.*
2. *Discuss how key state trends associated with biosimilar substitution are likely to affect pharmacists.*
3. *Summarize the controversies surrounding the naming of biosimilar products.*

G. Level of Interactivity

Current Accreditation Council for Pharmacy Education (ACPE) Standards require all CPE programs to include "learning activities to foster active participation." In the past, AMCP has required the use of an interactive platform to comply with this requirement. As AMCP encourages active participation and interactivity with the attendees, we are looking for different types of interaction. If AMCP wanted a more engaged session, what could you do? How would you engage the audience?

H. Disclosure of Financial Support

Provide disclosure of any financial support from a commercial interest (e.g., pharmaceutical industry) for any original research or data proposed.

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DEADLINE

Proposals must be submitted **no later than 11:59pm PT on Monday, June 15th, 2020**.

EVALUATION OF PROPOSALS

CPE session proposals will be evaluated by the AMCP education staff and Educational Affairs Committee. Criteria for review include but are not limited to topic relevancy to the managed care professional, risk of promotional bias, and expertise of faculty listed.

Due to the cancellation of AMCP 2020 in April, AMCP is transferring selected sessions to AMCP Nexus 2020. Therefore, the Nexus 2020 call for session proposals is more focused and the number of acceptances will be limited.

Preference will be given to proposals that highlight real-world examples of innovations in managed care, share outcomes data, and/or provide diverse professional perspectives.

Please note that session proposals that have already received commercial support or are being submitted by a marketing representative or company will be disqualified from the call for session proposals.

CONTACT INFORMATION FOR AMCP

Please contact education@amcp.org if you have questions.

NOTIFICATIONS

Notifications of acceptance and rejection will be sent no later than July 31, 2020.

APPENDIX A: EDUCATION TRACKS

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TRACK: Drugs, Disease and the Managed Care Impact

	Topic	The Proposed Session Should Answer Some of the Following Questions:
1.	Migraines	• What is the role of second-generation medications in current management and how are they being used? • What are the drug utilization management strategies being used for second generation medications, such as ditans and gepants, in various plans? • What does the migraine prevention and treatment pipeline look like in the future?
2.	Evaluating the Payer's Role in Pandemics: Focus on COVID-19	• What role do health plans play in the response to pandemics and epidemics? • How has the health care community changed in response to COVID-19? • What were lessons learned from COVID-19? • What is the status of a potential vaccine or treatment forCOVID-19? What management strategies are being employed and how will this impact our drug supply? • What can be done to manage pandemics in the future?
3.	Opioid Use – Lock-In Programs	• How have lock-in programs changed over the last couple years? Over the last few months? • What type of longitudinal outcomes are being seen with these types of programs?
4.	Diabetes	• What is a collaborative model approach to the management of diabetes and how can it lead to positive patient outcomes? • What type of patient outcomes are being seen with this type of approach? • Based on a plan's experience, have authorized generics for insulins lead to more affordable care? Did this have a meaningful impact on the overall challenge of high cost insulins? • What has the impact of COVID-19 and changes to insulin coverage had on payers?

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5.	Oncology – Therapeutic Update and Pipeline	• What advances have been made, specifically in breast and pancreatic cancer? What does the future look like? • What are the differences between the clinical review process and cost effectiveness modeling for traditional drugs vs oncology drugs? Share the reviews. • What agents in the current pipeline have the potential to be significant advancements in cancer care?
6.	Oncology – Contracting and Management Strategies	• What are the different risk structures? Indicate the performance results of successful oncology model. • Why would a value-based reimbursement schedule be beneficial for oncologists to prescribe a novel therapy? • How does value-based contracting lead to cost-saving measures for oncology therapies? • How is the value of oncology drugs determined? • When oncology prior authorization requests come in, what are health plans doing to review them? • What are some new developments implemented by health plans that have improved chemotherapy adherence?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

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TRACK: Legislative and Regulatory Trends

	Topic	The Proposed Session Should Answer Some of the Following Questions:
1.	The Rising Cost of Pharmaceuticals	• What approaches have certain states taken to balance/regulate beneficiary access to pharmacy benefits and spending of blockbuster medications? • What policies and legislation have been proposed from both sides to reduce high drug costs? What are the advantages and disadvantages of each proposed plan? • Are there efforts to incentivize companies to continue to manufacture generics? • What are the pros/cons, projected cost of savings and pharmacy implications of drug importation from abroad? • What are the regulations on improving transparency related to pharmaceutical prices and transactions?
2.	Pharmacy Choice – Anti-Steering	• What impact will the new Pharmacy Anti-Steering and Transparency Act in Georgia have on allowing patients to choose their pharmacy? • What are other states doing in response to pharmacy choice? Will this be applicable in other states? • What actions can PBMs take to manage costs through funneling to in network pharmacies?
3.	Prior Authorizations	• What are the various stakeholder perspectives on prior authorizations? • What would be some best practices for appropriate patient care and containing costs when using prior authorizations? • What type of outcomes are seen from using best practices with prior authorizations?
4.	Shift from Fee-for-Service to Value-Based Care	• How is value-based care being used in practice today? What benefits and challenges is this bringing to managed care pharmacy?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

		• Does value-based care represent a more/less appropriate way of delivering care and assessing value of products and services?
5.	Exchange Plans	• What unique challenges do exchange plans face? • What are exchange plans' strategies to manage rising pharmaceutical costs? • What laws and regulations are in place (or will be expected) for exchange plans? How are they different from those for Medicare/Medicaid? • What impact has COVID-19 had on the Exchanges and Medicaid?
6.	Provider Status: Role of Pharmacist Testing with COVID-19	• What are the implications of pharmacists testing for COVID-19 for health plans? • How will reimbursement occur? What states have implemented provider status? What types of outcomes are being seen?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

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TRACK: Managed Care Research in Action

	Topic	The Proposed Session Should Answer Some of the Following Questions:
1.	Big Data	• How do you take "big data" and get useable and actionable data in a timely fashion to see actual outcomes? What are best practices? • What are the potential sources of big data, including data from health plans, PBMs, pharmaceutical manufacturers, etc.?
2.	Patient-Reported Outcomes (PROs)	• What is the significance of patient-reported outcomes for value-based contracting? • What are challenges of putting PROs in practice? • What's the path (future) for PROs? • How can health plans gather data if they are not IDNs? • How can health plans gather behavioral economic data? • What kind of insights can be derived using data science techniques? • What ways can payers operationalize the data collected from PROs?
3.	Predictive Analytics	• How are you using predictive analytics differently? Formulary placement? Care management programs? Clinical Program targeting?
4.	Technology	• What issues are present with managed care organizations (MCOs) and emerging technology? • What is data blocking and how does it impact interoperability and new technologies? • How is artificial intelligence currently being used by managed care organizations, and how will it be used soon? • What criteria must be met for the interactions between health care providers and patients that occur through virtual channels (text message, Skype etc) to be considered as billable services?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

		• What impact has technology had in the realm of COVID-19?
5.	Post-Marketing Study Requirements from the FDA	• Many new drugs are being approved with limited data and surrogate endpoints. The FDA has approved them but requires post-marketing studies (PMS). What are the trends in PMS? Have drugs been pulled from the market if they are not found to be effective? What results are being published? • For medications that were approved without robust Phase III data, what are the pharmacy and medical data to demonstrate value? • What other type of data is being used in decision-making when limited clinical trial information is available? • What impact can managed care research have towards chronic disease states, and what research tools are utilized to address concerns (cost, effective, outcomes)?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

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TRACK: Specialty Management

	Topic	The Proposed Session Should Answer Some of the Following Questions:
1.	Biosimilars	• How are plans covering biosimilars? What criteria is being evaluated in PBM preferred biosimilars? • What are emerging trends in the marketplace surrounding biosimilars? • What is the most recent legislation/regulations around biosimilars?
2.	Specialty Drug Use Management	• What innovative resources can payers use to manage utilization of specialty medications? • How do smaller plans manage high costs of specialty medications?
3.	Outcomes Metrics	• Why are outcome metrics important in specialty (compared to process metrics)? • What patient-specific factors are evaluated when managing specialty medications? • Is there differentiation of outcomes in white bagging versus brown bagging?
4.	Specialty Drug Spend Management	• What strategies can health plans take to better manage specialty medications? • How have these strategies demonstrated success before and after implementation? • What are the unique challenges for different lines of business (Medicare, Medicaid, and Exchange)? • What kind of innovations can be used to help manage specialty drug spend? What are traditional health plans vs. startup plans doing? What type of outcomes are plans seeing? • What are the pros and cons of point-of-sale rebates?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

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TRACK: Making the Way for Innovation

	Topic	The Proposed Session Should Answer Some of the Following Questions:
1.	Gene Therapy Pipeline	• What new gene therapies are coming to market? Which are expected to be "game-changers"? • What are health plans doing to clinically manage gene therapy?
2.	Gene Therapy Payment Models	• What approaches can be used to manage gene therapy costs? • Now that there are several gene therapies on the market, what are the different payment models that payers are utilizing and what are the pros/cons of each? • How do you assess value in gene therapy?
3.	Digital Therapeutics Pipeline	• What products are on the market? What products are coming to market in the next year? How do these products compete against each other and against other drugs or medical therapies? • What is the potential budgetary impact of these pipeline digital therapeutics? • Indicate the approval process for digital therapeutics. How are price points identified and what kind of outcomes must be demonstrated in order to obtain approval?
4.	Digital Therapeutics: Evidence and Real-World Outcomes	• What type of evidence is used to gain FDA approval for digital therapeutics? • What are the real-life examples of particular digital therapeutics being utilized and the subsequent impact on quality (clinical outcomes) and cost outcomes?
5.	The Evolving Role of Telemedicine	• Since the COVID-19 pandemic, what trends have occurred with telemedicine over the last several months? • What impact has the growth of telemedicine had on health plans and drug use and overall costs of care? • How do patients and providers feel about telemedicine? How will this influence the future role of telemedicine?

Preference will be given to proposals that not only answer the proposed question, but highlight real-world examples, share outcomes data, and/or provide diverse professional perspectives.

APPENDIX B: MEASURABLE ACTION VERBS FOR CONTINUING PHARMACY EDUCATION ACTIVITIES

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Measurable Action Verbs for Continuing Pharmacy Education Activities

Note: This is a list of suggested active verbs and is not intended to be all-inclusive. 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	Identify	Relate
Classify	Indicate	Restate
Define	List	Review
Describe	Outline	Select
Discuss	Recall	Summarize
Explain	Recognize	Translate

Application-Based

Analyze	Create	Illustrate
Apply	Demonstrate	Implement
Arrange	Describe	Interpret
Assemble	Design	Organize
Assess	Develop	Predict
Calculate	Differentiate	Prepare
Categorize	Distinguish	Rate
Collect	Estimate	Research
Compare	Examine	Select
Compose	Evaluate	Solve
Contrast	Identify	Teach