Call for Continuing Pharmacy Education Session Proposals

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Call for Continuing Pharmacy Education Session Proposals

AMCP invites proposals for continuing pharmacy education (CPE) sessions to be presented at **NEXUS 2023,** which is scheduled for October 16-19, 2023 in Orlando, Fl.

ABOUT NEXUS 2023

NEXUS 2023 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 **NEXUS 2023** are scheduled to be 1.25 hours long (75 minutes). To accommodate introductions, housekeeping information, and some question-and-answer time, actual content should be 45-60 minutes.

Topics are divided into six different tracks:

- General Managed Care Pharmacy
- Legislative and Regulatory Trends
- Business Trends
- Specialty Pharmacy
- Managed Care Research
- Drug, Diseases and the Managed Care Impact

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 to provide more context on what your proposed session should cover.

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 submitted by a marketing representative or company will be disqualified from the call for session proposals. Please consider submitting this type of proposal for a satellite symposia, science and innovation theater, industry workshop, or partner session.

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 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 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 **NEXUS 2023** 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 (i.e., facilitator plus two panelists). AMCP reserves the right to limit the number of faculty in a session and/or the type and amount of remuneration provided. AMCP also reserves the right to conditionally accept proposals for which AMCP 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 **NEXUS 2023** 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 in the final **NEXUS 2023** website/app. 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.

DEADLINE

Proposals must be submitted **no later than 11:59pm PT on Monday, April 24, 2023.**

EVALUATION OF PROPOSALS

CPE 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.

Notifications of acceptance and rejection will be sent no later than **Friday, July 14, 2023.**

QUESTIONS?

Please direct questions related to education@amcp.org.

APPENDIX A: LIST OF TRACKS AND TOPICS FOR

NEXUS 2023

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
1. General Managed Care Pharmacy	Utilizing Digital Engagement with Patients and Providers	• From a managed care perspective, what are some best practices in digital engagement with members and providers, and how do they impact satisfaction? What additional value, health outcomes, adherence improvements are achieved by engaging digitally versus traditional engagement methods? • How do digital engagement methods increase health equity and diversity?
2. General Managed Care Pharmacy	Digital Pharmacies	• What is the rise of "digital pharmacy" business models such as Amazon, Capsule, etc. in response to? Compare and contrast the top models providing real world evidence. • What does the adoption for digital pharmacies look like currently vs. projections? • How can the rise of digital pharmacies create new opportunities for managed care initiatives surrounding quality measures, advanced pharmacy care models, cost management, etc.? • Amazon, Cost Plus (Mark Cuban), GoodRx, CoverMyMeds, how are these and other companies looking to disrupt and improve the health care system? • What are career opportunities for pharmacists in digital pharmacies? • What challenges do digital pharmacies create for managed care organizations? • What impact does impending or implemented legislation have on these disruptors?
3. General Managed Care Pharmacy	Prescription Digital Therapeutics: A PRIMER	• Define the different digital health products. • What safety nets are in place to ensure patient privacy with digital therapeutics? • How many patients and providers are open to using / prescribing prescription digital therapeutics? Where are these products marketed and sold? Is the adoption expected

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		to be driven by payers, providers, or patients? • How do currently approved products work (using a demonstration)? • What is the overview of current products and what does the pipeline look like? • Describe strategies for patient and provider adoption (e.g., education, financial incentives, do they differ by disease condition, etc.)
4. General Managed Care Pharmacy	Prescription Digital Therapeutics: Formulary Design and Access	• Share real examples of the review, comparative effectiveness if applicable and results of formulary review • How are organizations evaluating prescription digital therapeutics? • What formulary approaches are managed care organizations using to cover prescription digital therapeutics? • What type of utilization trends and real-world outcomes are being seen with prescription digital therapeutics? Which channels or delivery settings are more prevalent (e.g. value-based health care delivery models, ACOs)? • How does reimbursement for these products work? • How is the payment for these coordinated? Does it fall under the pharmacy benefit, if so, what tier? What is this costing patients/health systems? • With the introduction of prescriptions digital therapeutics, what evidence do payers need to evaluate these products? • How important is the impact on total cost of care of these products? • What are some best practices when prescription digital therapeutics are being considered for formulary inclusion? • What types of outcomes/value-based agreements can be implemented in this space?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		• What follow-up is/should be done following coverage to ensure continued value? What data is/should be collected?
5. General Managed Care Pharmacy	Addressing Health Disparities within Regional Health Plans and Managed Care Organizations	• On a more regional level, what are some best practices and programs that can impact the care of patients from disparate communities? • How are managed care organizations and/or manufacturers using data collection and analysis, community engagement and other tactics to address health disparities? • Are there examples of partnerships or collaborative arrangements that have successfully addressed health disparities?
6. General Managed Care Pharmacy	Health Disparities and Medicare	• What are Medicare Advantage organization best practices to addressing health disparities that impact CMS Star rating measures? • What best practices exist related to educating members from disparate communities on formulary coverage and the prior authorization process? • What are best practices with prior authorization forms and/or the process that promote inclusivity and diversity? • How will the integration of social determinants of health (SDOH) into Medicare risk adjustment impact Star ratings and plan sponsor strategies?
7. General Managed Care Pharmacy	Strategies to Develop an Inclusive Formulary	• How should managed care organizations assess therapies that have limited data in certain populations? (e.g., if the studied population was 98% White, can we safely extrapolate the outcomes data to Black patients?) • What best practices/lessons learned are available related to data augmentation, collection, analysis and

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		utilization? How are these practices being implemented into the formulary process or benefit design? • How have drug manufacturers been engaged to address clinical trial diversity and data transparency?
8. General Managed Care Pharmacy	CAHPS and Member Satisfaction	• How do CAHPS measures reflect member satisfaction? How do they impact Medicare star ratings? • What strategies are Part D plans executing to improve CAHPS scores? How may these strategies differ based on member segmentation, preferences, behaviors? • How are plan sponsors leveraging Medicare star measure interventions like adherence to improve CAHPS results?
9. General Managed Care Pharmacy	Prior Authorization (PA) in the 21st Century	• What do electronic PA (ePA) trends look like? How does this vary for medical vs. pharmacy benefit PAs? • What are the advantages and drawbacks of ePA? • Are there any new technologies (e.g.,data intelligence, EMR access, automation) within the PA process that could increase efficiencies and improve communication between provider, pharmacy, member, and health plan/PBM? • What changes have been observed since COVID? What has worked and what has not? What changes will/will not be continuing "post"-COVID? • What advancements are being made in terms of using claims data, artificial intelligence, and/or automation to increase PA efficiencies? • How are RTBT (real-time benefit tools) working? What are the lessons learned or best practices? • What incentives do health plans and PBMs have to improve the PA process? How can we accelerate adoption of a better and more efficient process?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		• How is member engagement and feedback incorporated into the PA process? • What efforts have been made to incorporate EMR into the PA process?
10. General Managed Care Pharmacy	Indication-Based Formularies	• As biologics increasingly gain overlapping indications (e.g., atopic dermatitis, severe asthma, Crohn's disease, ulcerative colitis, psoriasis, RA, etc.), managed care strategies become more complex. What is the role of indication-based formulary design in this environment? Provide examples to illustrate how this can be done and why more indication-based reviews might be needed and/or reasons to NOT review by indication • What have been the successes of indication-based formularies thus far? What have been the challenges? • Is this a trend that is expected to continue in the years to come? • Does indication-based contracting remain the driver of indication-based formulary design? • What has been the adoption rate of these formularies?
11. General Managed Care Pharmacy	Innovative Collaborative Partnerships with Outside Providers/Health Systems	• What best practices exist for MCOs collaborating with providers and health systems? • What were the results of the collaboration? • What opportunities exist to expand on these efforts? • What lessons were learned that may help outside organizations implement similar programs? • Are there any differences in outcomes from this partnership? • How are these collaborations created?
12. General Managed Care Pharmacy	Integrated Delivery Networks (IDNs)	• What is the value of the IDN model? Does it only work in certain settings? Is this a trend that is expected to grow within the healthcare delivery sector? • What does the intersection between IDNs and health plans, manufacturers,

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		and PBMs look like? How do these different players collaborate with IDNs?
13. General Managed Care Pharmacy	Innovations in Benefit Design	• What role do high-deductible health plans have in benefit design? • What unique, novel benefit design strategies are being used today and what is being considered for the future? • What benefit designs are most valued by employer groups and patients?
14. General Managed Care Pharmacy	Best Practices in Developing Patient-Centric Formulary Decision-Models	• What is the value of the patient perspective in formulary design? • What are some best practices in including the patient perspective in formulary decision-making? • How do these practices influence the overall outcome of patients? • What is the role of PROs in these models?
15. General Managed Care Pharmacy	"Hospital at Home" Programs	• What are these programs? • How do these programs impact the pharmacy benefit, care management programs and specialty care? • Are patients' outcomes any different? • What are some challenges and strategies to overcome these challenges when instituting these programs?
16. General Managed Care Pharmacy	Proven Strategies to Improve Challenging Star Measures	• What Star measures have proven exceedingly challenging this year? • What strategies were used to target these measures? • As we head into the final push for 2023 and start fresh in 2024, what strategies can plans use to improve their performance on these tough-to-reach measures? • What are health plans doing to meet the CMS proposed changes for MTM programs in 2024? • What changes to Star measures are forthcoming for 2024?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
1. Legislative and Regulatory	340B	• With announcements by pharmaceutical manufacturers that they will limit 340B discounts to safety-net hospitals using contract pharmacies to distribute medications, what are the implications and what changes are occurring in the 340B Drug Discount Program and for related entities? • What are the latest updates regarding HRSA and manufacturer networks for 340B contract pharmacies? • What is the impact of 340B programs on specialty pharmacies and their relationship with managed care organizations? • What 340B program impact may proposed inflation reduction act guidance bring to the industry?
2. Legislative and Regulatory	Pay for Performance Programs	• What does the future of pay for performance programs look like and what are the implications to managed care organizations? • What are some best practices or lessons learned around performance-based reimbursement? • How are all lines of business impacted by these programs? • What legislative activity is occurring at the state and federal level around pay for performance programs? • What are scalable models from private payers that state and federal programs could emulate? • What standard performance measures are used as the basis for pay for performance contracts?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
3. Legislative and Regulatory	2023/ 2024 Health Priorities	• What policies are U.S. policymakers considering aimed at increasing cost-effectiveness and affordability of Rx drugs? • How will these proposed policies impact managed care organizations? • What does the horizon look like if there is a change in administration in the next election cycle? • What are some health care policy proposals under consideration (e.g., ACA enhancements, Medicare benefits, drug pricing)? • List/ describe other upcoming congressional activities (e.g., appropriations, sequestration, physician payment)? • In addition to significant legislative activity taking place in Congress, what other agency and regulatory actions are expected through 2023? • What is going on at state levels that may be applicable to or have an impact on other states? (e.g., CalCare) • What work, if anything, is being done around drug importation? How would this impact managed care pharmacy?
4. Legislative and Regulatory	Copay Accumulators and Maximizers	• What are the arguments for and against the use of copay accumulators and maximizers? Please speak to the following perspectives: manufacturer, patient, health plan, employer, PBM, provider, health system. • How have state legislatures responded to the use of these? Do copay accumulators and maximizers have unintended consequences?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		• What programs have been implemented by pharmaceutical manufacturers to circumvent copay accumulators/maximizers?
5. Legislative and Regulatory	Inflation Reduction Act	• What actions are being taken at the health system, PBM, and health plan levels based on the Inflation Reduction Act? • What effect are these changes having on patient choices and the consumerism of health care? • How will the Inflation Reduction Act and government drug negotiations impact the rest of the marketplace?
6. Legislative and Regulatory	Benefit Design/Utilization Management Legislation	• What recent state mandates or federal legislative items have been passed or considered that influence benefit design (e.g., formulary) and/or utilization management strategies (e.g., step therapy, prior authorizations, channel management)? • How do these vary by line of business? • What are the goals of these legislative changes and potential unintended consequences?
7. Legislative and Regulatory	Mergers and Acquisitions	• How does M&A influence or impact the health care system/managed care? • What upcoming M&A are there to look out for?
8. Legislative and Regulatory	Legislative Update: Focus on Biosimilars	• What are the latest legislative and regulatory actions from a federal and state level related to biosimilars? • What does the future hold for biosimilars in terms of interchangeability on the drug level? How do state laws differ regarding interchangeability??

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
1. Business Trends	Value-Based Contracting	• How is VBC working today? Are a lot of companies, MCOs and IDNs using these types of contracts? • What are some of the challenges/barriers? What are the advantages? • What treatments tend to work best for which types of arrangements? • What are best practices in terms of data collection and sharing? (e.g. Is there a specific disease state where this is working really well?) • What are some short- and long-term incentives for manufacturers and payers that should be considered when developing VBCs? • What is the effect of different VBCs on cost and clinical outcomes? • Have we seen a shift in the environment in plans ability to operationalize VBCs? • What is your real-world experience with these models? • What are the present and future implications of VBC in specialty pharmacy? • What is the impact of alternative payment models on various lines of business?
2. Business Trends	Alternative Payment Models for High Impact Medications	• What types innovative payment models exist? What are the benefits and drawbacks of these? • What real-world evidence exists surrounding alternative payment models? • How may alternative payment

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		models be used for expensive novel therapies (e.g., gene therapies)?
3. Business Trends	Value Frameworks	• Compare and contrast the various value frameworks used today? • How are these used in formulary management? • What are the benefits and challenges of each type of value framework? • What is an ideal value framework? • How should these be considered as part of the coverage and reimbursement framework? • Compare and contrast US-based vs UK- or Europe-based value frameworks.
4. Business Trends	Value-Based Care/ Payments and SDoH	• How can SDoH data support value-based care/ contracts? • Are there examples of collaboration with payers and Integrated Delivery Networks (IDNs)? ○ e.g., Proactively gathering data, sharing with providers and reporting data across care continuums • What are some examples of value-based programs that are addressing/ targeting SDoH? • What are some challenges to incorporating SDoH in benefit design? How can these be overcome?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
1. Specialty Pharmacy	Oncology Payment Models	• How do oncology management strategies differ from non-oncology management? • What are managed care organizations doing to manage oncology utilization? • How are current Oncology payment models working? • What outcomes are being seen by using these payment models? • What is the next Oncology Care Model? What does it look like?
2. Specialty Pharmacy	Coordination between Medical and Pharmacy Benefits	• What are best practices in coordinating between the medical and pharmacy benefit? • How have these best practices been implemented? What challenges did you overcome? • What outcomes are being seen through effective coordination of benefits? • What strategies are used around patient education (i.e., how are patients informed on the coordination between medical and pharmacy benefits so they are engaged and able to navigate appropriately)? • Has there been demonstrated sustained savings vs benefits not being coordinated?
3. Specialty Pharmacy	Employer Trends Related to Specialty Therapeutics/Drugs	• How are employers and employer groups managing specialty drugs and high investment medications like gene therapies? • What impact is this having on patients and on managed care organizations? • What is stop-loss insurance and what is its role in the healthcare system?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		• How do specialty medications impact stop-loss insurance premiums? How do employer groups respond?
4. Specialty Pharmacy	Collaboration with Specialty Pharmacies	• What is the relationship between managed care organizations and specialty pharmacies? • What does specialty pharmacy accreditation mean? • What is the impact of 340B programs on specialty pharmacies and their relationship with managed care organizations? • What type of clinical care programs do specialty pharmacies offer? • How do managed care organizations assure quality of services and continuous quality improvement? • Do they have improved patient outcomes compared to traditional pharmacies? • How has vertical integration of PBMs/SPPs/Insurers, impacted the specialty pharmacy landscape and the role of pharmacists in managed care? • How are specialty pharmacies staying engaged with the patient/caregiver to ensure adherence with the medication and adverse event management? What is the role of technology and barriers with advances in technology (e.g., elderly and mental health)?
5. Specialty Pharmacy	Strategies for Anticipating and Managing Gene Therapy	• Outline current and future pipeline approvals and availability. What therapeutic areas are being targeted? • What is the value of gene therapy and its role in the advancement of care? • Review key clinical, operational, and financial implications of gene therapy.

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		• Describe best practices for navigating the gene therapy journey across multiple stakeholders (i.e., plan, payer, and member) • Outline payer strategies for anticipating and managing gene therapy cases • How does value-based contracting play into gene therapy cost management? • What solutions have been proposed to manage gene therapy costs? Are they all appropriate? Why or why not?
6. Specialty Pharmacy	Application of Precision Medicine (PM) in Specialty Pharmacy	• Summarize past and future drug development in the era of PM. What are some examples of PM used in practice today? What are some examples of PM that are being studied? • Outline strategies for integrating PM into overall pharmacy practice. How should managed care pharmacists utilize PM to enhance formulary design? • What are some limitations in growth of PM (e.g., costs, handling genetic information and data collection, access to RWE and patient outcomes)? • How can managed care organizations help overcome these limitations?
7. Specialty Pharmacy	Quality	• How is quality assessed in the specialty pharmacy space? • What impact do specialty pharmacies and pharmacists provide to quality metric performance, clinical outcomes? • What are some examples of specialty pharmacy performance measures, who are the measures stewards, and how do managed care organizations use them in assessing quality? • Strategies / best practices for specialty pharmacies who are looking to improve their quality or become accredited?
8. Specialty Pharmacy	Site of Care	• What are trends in home infusion/ambulatory infusion center

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		utilization? How has Covid- 19 impacted or accelerated these trends? • What data are available on the real-world financial saving opportunities with a site-of-care strategy? What are the patient, provider, health system, and payer perspectives on site of care steering? • What are health systems/providers doing in response to site of care payer strategies?
9. Specialty Pharmacy	Biosimilar Adoption	• What strategies are improving biosimilar adoption? • How are payers/ PBMs preparing for more ambulatory biosimilar drugs to be released to the market in the near future? • As adalimumab biosimilars are entering the market in 2023, how has the market adopted these biosimilars and what changes are anticipated in future years? What has the impact of a low and high cost NDC strategy had on the marketplace dynamics? • How have payers/ PBMs reacted to more ambulatory biosimilar drugs being released on the market in the near future? • Discuss the adalimumab biosimilars role out? What strategies were implemented to ensure a smooth transition for patients? What lessons have been learned that can be applied to future biosimilar launches? What challenges were faced? • What are the challenges associated with biosimilar adoption and what has been done and/or can be considered

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		in overcoming them?
10. Specialty Pharmacy	Biosimilars in Immunology	• How many biosimilars are in the immunology pipeline? • How can managed care organizations implement formulary design changes while ensuring patients are safely and efficiently switched from current therapy to a new biosimilar? • How can managed care organizations overcome patient and clinician inertia on biosimilar use? • How can managed care organizations overcome the challenges with rebates of the reference products? How does this impact a "lowest net price" strategy and biosimilar inclusion on the formulary? • Does the landscape keep pace with additional indication approval of the reference product?
11. Specialty Pharmacy	Biosimilars in Oncology	• How many oncology biosimilars are in the pipeline, both supportive care and chemotherapeutic agents? • What are the real-world outcomes data for use of biosimilars in oncology? • What challenges and opportunities are specific to oncology biosimilars (e.g., pace of innovation, manufacturer launch, indications for use, aligning with NCCN recommendations, measuring outcomes) • How are oncology biosimilars included in cancer clinical pathways? And how are health plans coordinating with health systems for management of preferred products?

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
1. Managed Care Research	Artificial intelligence (AI)	• Define AI. How does this differ from machine learning? • How has/will AI change the health care landscape? • What do managed care pharmacists need to know about AI, including ChatGPT? • What nsights and lessons have been learned from AI use in the managed care pharmacy setting? • What are the challenges with AI regarding health disparities and bias?
2. Managed Care Research	Using Patient-Reported Outcomes for Clinical Decision-Making	• How are managed care organizations using patient reported outcomes (PRO) data? • How can its validity and accuracy be ensured? • How is this information being used for clinical decision-making and/or for utilization management? • When are PRO outcomesincorporated in P&T decisions? Should it be? • How can other stakeholders (e.g., specialty pharmacies) potentially assist with PRO gathering / analysis?
3. Managed Care Research	Real-World Data/Evidence Sources and Integrity	• How are managed care organizations using real world evidence/data? • How do you ensure its validity and generalizability? • How is this information used making utilization management or economic evaluations? • How does RWD differ from RWE? • What is the use of RWE in regulatory decision making and its impact on managed care? • What do managed care pharmacists need to know when interpreting drug approvals

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		based on RWE submissions? How are managed care professionals trained to interpret and ensure the validity and usability of RWD/RWE?
4. Managed Care Research	Behavioral Economics: Incentives within Health Care	• How is behavioral economics being used by managed care organizations? • What type of data is collected and analyzed? • What are some case studies of this type of data being used and what outcomes are being seen?
5. Managed Care Research	Trends and Future of HEOR Data	• How is HEOR data being used today? • How are researchers working with the actuarial teams to refine their data and research? • What does the future of HEOR work look like? • How is real-world evidence and patient reported outcomes used in HEOR work?

6. Managed Care Research	Use and Handling of ICER Reports	• Provide insights on the use, handling, and quality of ICER reports for use in formulary development/ management
		  ○ How do you interpret the results of cost-effectiveness studies?
		• Outline payer perspective using ICER
		  ○ What are some strengths and challenges?
		• Describe implications for payers and manufacturers
		• What is the ICER Barriers to Fair Access Assessment and what findings and insight are detailed within the report?

7. Managed Care Research	Using Digital Therapeutics Data	• How are health plans/PBMs able to use the data collected from prescription DTx to improve care and determine ongoing DTx or medication coverage? • How are providers using DTx data to improve care? • How do we prevent data

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		overload? • Are health plans/PBMs, and/or providers/hospitals using DTx data now? If so, how are they using it? If not, what barriers exist and what are some solutions to overcome those barriers?
8. Managed Care Research	Outcomes: HEDIS Metrics	• How are HEDIS metrics impacting overall outcomes (does it improve outcomes?) • How should HEDIS metrics be updated to make them more relevant to real world (are we collecting and measuring appropriate data)?
9. Managed Care Research	Strategies to Effectively Manage the Behavioral Health Space	• What strategies are health plans using to manage this space and what has actually worked?
10. Managed Care Research	Post-Marketing Surveillance & its Use in Treatment and Coverage Decisions	• Describe data and surveillance mechanisms in place for biosimilar use. • How are you collecting RWE and post-marketing surveillance data related to adverse effects as well as switching data? ○ What gaps have been identified? How has this data been used to improve benefit design? • Discuss RWE needs and opportunities to help with biosimilar adoption.

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
1. Drug, Diseases and the Managed Care Impact	Biosimilars Pipeline Update	• What are the most recent approvals of biosimilars in the last year? What is the impact of these new biosimilars being approved and available? • What biosimilars are on the horizon? When are they expected to launch? What impact will these have on the overall cost of care for specific conditions?
2. Drug, Diseases and the Managed Care Impact	Oncology Pipeline	• What does the future of Oncology treatment look like? • Discuss the drug pipeline for Oncology treatment and the impact of this pipeline on patient management.
3. Drug, Diseases and the Managed Care Impact	Cardiovascular Disease	• What is in the pipeline for the treatment of CV disease? • Where do these new treatments fit in the current guidelines and formulary management? • What recent updates in the treatment of CV disease should health plans be aware of to ensure coverage guidelines are up-to-date?
4. Drug, Diseases and the Managed Care Impact	Update on hATTR amyloidosis polyneuropathy and cardiomyopathy	• What does the pipeline look like? • Where do pipeline medications fit in the treatment of hATTR? • What challenges do managed care organizations face with off-label medication use for obesity (e.g., off-label use of certain medications and the impact on availability for patients using these therapies for labeled indications)? What strategies have been employed to overcome these challenges? • What management strategies are used?
5. Drug, Diseases and the Managed Care Impact	Update on Alzheimer's Disease	• With CMS' move to limit access to specific products, what does this mean for the future of Alzheimer's

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		therapy? • What updates (if any) have there been on the newest FDA approved drug? • How does CMS' stance on these products impact commercial coverage? • What other products are in development? Will the data be as challenging as previous drugs? • How will the recent ICER report regarding lecanemab influence managed care?
6. Drug, Diseases and the Managed Care Impact	Rare Diseases	• What managed care strategies are best suited for the management of rare diseases (e.g., small plans with family of inherited rare disease, coordination with patient registries)? • How does the FDA orphan drug designation impact drug pipeline and formulary decisions? • What are the next anticipated breakthrough therapies for specific rare diseases?
7. Drug, Diseases and the Managed Care Impact	Parkinson's Disease	• What newly indicated, repurposed agents, or novel therapies are emerging for the treatment of Parkinson's Disease? • How are managed care organizations addressing quality of life, disease burden, health outcomes for Parkinson's Disease?
8. Drug, Diseases and the Managed Care Impact	Multiple Sclerosis	• What racial disparities exist for Multiple Sclerosis and how are managed care organizations addressing them? • What treatments are emerging for the treatment of Multiple Sclerosis and considerations related to health equity?
9. Drug, Diseases and the Managed Care Impact	Obesity	• What is the comparative effectiveness of the agents for obesity? • What is the impact of off-label weight loss

Topic # and Track	Topic	Scope of Session/Proposed Questions Session Should Answer
		use with GLP-1 products on different lines of business? What are the risks and benefits? • What do the guidelines outline? Incorporation of ICER reports? • Comparative effectiveness of drugs vs surgical interventions?

APPENDIX B: MEASURABLE ACTION VERBS FOR CONTINUING PHARMACY EDUCATION ACTIVITIES

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	