



Call for Education Session Proposals Submission Guidance

AMCP Nexus 2019

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AMCP Nexus 2019

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 Nexus 2019, which will be held October 29 to November 1, 2019, at the Gaylord National Hotel & Convention Center in National Harbor, Maryland.

About AMCP Nexus 2019

AMCP Nexus 2019 is expected to attract approximately 2,500 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 *AMCP Nexus 2019* will be 1.5 hours long (90 minutes). To accommodate introductions, housekeeping information, and some question and answer time, **actual content should be 75 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 five 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.

*****Please note this important change:** The submitter of the proposal must be a faculty member on the session.***

Track: The Intersection of Value and Care

#	Topic	Recommended Learning Objectives
1	Value-based pharmacy programs success story	<ol style="list-style-type: none"> 1. Discuss challenges and opportunities with value-based care programs. 2. Summarize real world value-based pharmacy programs and outcomes.
2	Outcomes and value based arrangements- examples across different lines of business	<ol style="list-style-type: none"> 1. Identify the different types of outcomes-based arrangements across different lines of business, including commercial, Medicare, and Medicaid. 2. Discuss best practices in sharing non-confidential information between stakeholders when participating in value-based arrangements. 3. Discuss lessons learned from real world value-based arrangements.
3	Risk sharing arrangements with physicians and/or pharmacies	<ol style="list-style-type: none"> 1. Discuss a program that engages physicians and/or pharmacies in risk sharing arrangements. 2. Identify tactics for increasing stakeholder engagement in these programs. 3. Describe the real world outcomes of this program.
4	Alternative payment models- e.g. Netflix subscription model, MACRA and MIPPS, etc	<ol style="list-style-type: none"> 1. Discuss how to better engage and educate physicians in alternative payment models. 2. Identify measurements being used in alternative payment models. 3. Summarize real world outcomes data from alternative payment models.
5	Oncology care model	<ol style="list-style-type: none"> 1. Describes lessons learned and best practices from oncology care models. 2. Summarize real world outcomes from oncology care models.
6	Assessing value for tumor-agnostic cancer medications (interactive training-type program)	<ol style="list-style-type: none"> 1. Summarize current safety and effectiveness data for tumor-agnostic cancer medications. 2. Identify key measurements to assess value for tumor-agnostic cancer medications. 3. Determine how to assess value of tumor-agnostic drugs using value assessment tools in a case study.
7	Rare Diseases	<ol style="list-style-type: none"> 1. Discuss what managed care organizations are doing to ensure high cost treatments are being used appropriately for rare disease management. 2. Discuss examples of successful risk sharing arrangements between payers and physicians for rare disease management.

8 Patient assistance program, copay coupons, and copay accumulators - tracking and managing usage	<ol style="list-style-type: none">1. Review federal and state regulations regarding the use of copay cards, copay accumulators, and patient assistance programs.2. Discuss the impact of copay accumulators on stakeholders, including consumers, providers, and managed care organizations.3. Describe how and where copay accumulators are being applied.4. Review examples of how plan sponsors are treating copay cards, copay accumulators, and patient assistance programs, and incorporating them within their pharmacy benefits.
9 Social determinants of health	<ol style="list-style-type: none">1. Identify at least three key social determinants of health.2. Describe how social factors can influence health outcomes.3. Discuss how social determinants of health are incorporated into care management programs.

Track: Legislative and Regulatory Trends: From Rhetoric to Practice

#	Topic	Recommended Learning Objectives
1	World without rebates	<ol style="list-style-type: none"> 1. Discuss how eliminating middlemen could change the patient experience and satisfaction. 2. Identify administration fees and or other charges that would replace the historical rebates for suppliers. 3. Summarize how the elimination of rebates may impact managed care organizations.
2	Opioid clinical management programs	<ol style="list-style-type: none"> 1. Discuss the status and impact of opioid restrictions on payers and patient access. 2. Describe best practices in successfully managing an opioid clinical management program. 3. Discuss the role of pharmacists can play in medication assisted therapy. 4. Discuss the impact of ePA on patient access and walk away rates.
3	Administering naloxone kits- Role of managed care pharmacy	<ol style="list-style-type: none"> 1. Interpret the role pharmacists can play in opioid overdose prevention and treatment. 2. Demonstrate the administration of naloxone to victims of opioid overdose. 3. Discuss how managed care pharmacists can help improve patient and clinician access to naloxone kits.
4	CMS audits	<ol style="list-style-type: none"> 1. Discuss lessons learned from payers after the most recent CMS audits. 2. Describe how payers can better prepare for future CMS audits.
5	Drug pricing transparency	<ol style="list-style-type: none"> 1. Summarize the current landscape of drug pricing legislation and regulation. 2. Discuss opportunities and challenges in drug pricing transparency. 3. Describe programs that improve drug price transparency and outcomes seen from these programs. 4. Summarize new restrictions on drug pricing in Medicaid.
6	Health care reform and Affordable Care Act update	<ol style="list-style-type: none"> 1. Summarize the state of affairs of health care since the 115th United States Congress. 2. Identify key developments impacting payers.
7	The evolving role of pharmacists	<ol style="list-style-type: none"> 1. Summarize updates to pharmacist status. 2. Outline state-level changes to scope of pharmacists. 3. Identify opportunities to maximize the use of pharmacist expertise in innovative ways.

		4. Discuss how payers are working with pharmacists who have expanded scopes of practice.
8	Medicaid managed care rule	<ol style="list-style-type: none"> 1. Summarize updates to the Medicaid managed care rule. 2. Describe the impact to payers. 3. Discuss discussing some of the new reporting requirements from Medicaid and how this data will be used.
9	Medical Marijuana – point counterpoint	<ol style="list-style-type: none"> 1. Summarize the changing legislative and regulatory landscape in reference to medical marijuana. 2. Discuss current data on the safety and effectiveness of medical marijuana. 3. Identify the risks and benefits seen with medical marijuana thus far. 4. Discuss the impact of marijuana dispensing outside of the pharmacy benefit and how payers are addressing this.
10	21st century CURES	<ol style="list-style-type: none"> 1. Discuss the update on implementation of the 21st century CURES act. 2. Describe the impact on managed care pharmacy.

Track: Drugs, Diseases and the Managed Care Impact

#	Topic	Recommended Learning Objectives
1	Pain- Chronic	<ol style="list-style-type: none"> 1. Discuss best practices in the management of chronic pain while sparing the use of opioids.
2	Neurology – Pharmaceuticals and medical devices in the pipeline- e.g. migraines	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months. 2. Discuss the mechanisms of action, indications, efficacy, and safety of the new and emerging neurological medications and devices. 3. Report the likely effect of new medications on the managed care market from a quality and cost perspective.
3	Depression/Major depressive disorder pipeline	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months. 2. Discuss the mechanisms of action, indications, efficacy, and safety of the new and emerging medications. 3. Report the likely effect of new medications on the managed care market.
4	Generic pipeline	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months. 2. Discuss the mechanisms of action, indications, efficacy, and safety of the new and emerging medications. 3. Report the likely effect of new medications on the managed care market.
5	Digital health	<ol style="list-style-type: none"> 1. Describe what constitutes a digital therapeutic. 2. Identify new digital health therapies in use and in the pipeline. 3. Discuss the place in therapy and formulary management strategies.
6	Patient safety session	<ol style="list-style-type: none"> 1. Review outcomes from a real-world patient safety program implemented by a payer. 2. Discuss lessons learned and best practices payers can use in implementing and managing a patient safety program.
7	Allergic conditions	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months. 2. Discuss the place in therapy and impact on formulary management of new medications. 3. Report the likely effect of new medications on the managed care market.
8	Alzheimer’s	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months.

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2. Discuss the place in therapy and impact on formulary management of new medications.
 3. Report the likely effect of new medications on the managed care market.
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Track: Specialty Management: Keeping Up with Runaway Innovation

#	Topic	Recommended Learning Objectives
1	Streamlining the Patient Experience	<ol style="list-style-type: none"> 1. Discuss examples of successful programs of adherence and persistency with specialty drugs. 2. Identify best practices in diminishing the lag time between the prescribing of a medication and the patient actually getting the medication.
2	Precision Medicine in Oncology	<ol style="list-style-type: none"> 1. Summarize the current evidence and landscape of precision medicine in oncology and discuss its impact on quality and cost of care.
3	Hemophilia – New and Emerging agents and Innovative Management Programs	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months. 2. Discuss the place in therapy and impact on formulary management of new medications. 3. Discuss innovative clinical management programs to help contain costs while ensuring appropriate access to care.
4	Specialty Pharmacy budget impact	<ol style="list-style-type: none"> 1. Identify high-impact specialty drugs in the 2020-2021 pipeline. 2. Summarize efficacy and safety data for high-impact pipeline drugs. 3. Explain how emerging pipeline drugs compare with currently available therapeutic options. 4. Indicate the likely place in therapy and budgetary impact of emerging pipeline drugs.
6	Biosimilars update	<ol style="list-style-type: none"> 1. Discuss the data on biosimilar cost effectiveness and out-of-pocket costs for patients. 2. Describe what the patent dance is and how companies are delaying the release of new biosimilars by extending patent life. 3. Discuss regulatory updates as it relates to biosimilar approval process and interchangeability. 4. Identify generic medications and biosimilars that are likely to be approved in the next 12 months.
7	Innovations in Migraine treatment	<ol style="list-style-type: none"> 1. Identify generic medications that are likely to be approved in the next 12 months. 2. Report the likely effect of new migraine medications on the managed care market.
8	Nonalcoholic steatohepatitis (NASH)	<ol style="list-style-type: none"> 1. Identify medications that are likely to be approved in the next 12 months. 2. Discuss the place in therapy and impact on formulary management of new medications.

		3. Report the likely effect of new medications on the managed care market.
9	Preparing for Gene Therapy	1. Discuss what payers can expect for the future of management of gene therapies. 4. Discuss how payers can better prepare themselves now for agents in the pipeline.

Track: Managed Care Research in Action

#	Topic	Recommended Learning Objectives
1	Real World Data	<ol style="list-style-type: none"> 1. Discuss examples of how clinical trial results and real-world data have been the same or different, and implications for practice. 2. Describe examples and outcomes on how real world evidence shaped decision making.
2	Quality Metrics and Outcomes	<ol style="list-style-type: none"> 1. Discuss examples of how payers have improved quality measures. 2. Discuss the impact of quality metrics on scope of practice with patients.
3	Medication Adherence	<ol style="list-style-type: none"> 1. Describe the most effective methods of increasing adherence for chronic disease management medications.
4	Predictive Analytics	<ol style="list-style-type: none"> 1. Discuss the role of predictive analytics and artificial intelligence in improving the health of a population. 2. Identify real world outcomes from innovative predictive analytics applications.
5	Role of artificial intelligence in population health	<ol style="list-style-type: none"> 1. Discuss the impact of artificial intelligence on population health. 2. Describe how managed care pharmacy can leverage artificial intelligence to improve patient outcomes and population health.
6	Real-Time Benefit Check programs	<ol style="list-style-type: none"> 1. Discuss outcomes seen from a real-world real-time benefit check program. 2. Discuss challenges and opportunities payers have in implementing and improving real-time benefit check programs.

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 and/or programs and services.

Faculty Remuneration

Faculty associated with accepted CPE session proposals will receive:

- One complimentary *AMCP Nexus 2019* 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 1.5-hour continuing pharmacy education session should have no more than three 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 with certain modifications to content and faculty.

How to Submit a Proposal

*****Please note:** The submitter of the proposal must be a faculty member on the session.***

Proposals must include *all* of 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:

Proposal Presenters

Please create the list of presenters for this submission.

Proposal Title

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

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 vs 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.

Session Description

Create a brief (no more than 150 words) session description suitable for inclusion in the Final Program. 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.

Detailed Program Agenda

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

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. In accordance with Bloom’s taxonomy, 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 on the enclosed list (see last pages).

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.

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.

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 11:59 pm PT on Sunday, April 14, 2019.

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 19, 2019.

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 April 12, 2019.

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 handout.

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 one 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