

APG Annual Spring Conference 2023

REQUEST FOR PROPOSALS

America's Physician Groups (apg.org), which represents roughly 360 physician-led groups nationwide focused on value-based health care, seeks proposals for its Annual Spring Conference in San Diego, CA, which will occur on May 31-June 2, 2023. Attendance of roughly 1,200 is expected. **The deadline for round one consideration of proposals is Friday, January 13, 2023.**

The three-day conference will feature, first, a "pre-conference" day session focused on the crisis in the health care workforce, followed by two days (Days 1 and 2) of both plenary and breakout sessions. The breakout sessions of 75 minutes each will be organized into 6-7 different tracks. Typically, each breakout session consists of a panel session led by a moderator and 2-4 panelists/speakers, although single-speaker sessions will also be considered.

Learning objectives are created for each session so that continuing medical education credits (CME) can be offered. The most successful sessions offer the audience new insights into an existing situation, issue, or problem, and convey "how-to's" or promising practices to share learnings and takeaways that attendees can later put to use in their own work and settings.

APG seeks proposals for panelists in the pre-conference day Health Care Workforce Crisis sessions (see Item A below), as well as in the Days 1 and 2 breakout sessions and topics (see Item B below). To submit a proposal, please use this link by Friday, January 13: <u>APG Request for Proposals</u>.

A. Pre-Conference Health Care Workforce Crisis Sessions:

The dimensions of the workforce crisis facing health care – from the relative paucity of available providers in many fields, to widespread burnout, to the aging and retirement of many within the workforce – are well known. APG does not wish to recapitulate the problems, but rather, seeks to feature creative and proactive steps that organizations are taking to mitigate the effects or to forge solutions. Examples are especially sought in the following areas: Addressing the shortages of primary care and behavioral health providers; minimizing burnout; maximizing retention, particularly of lower-paid workers; expanding the available supply of workers through various means, including innovative support of educational initiatives. A session on advocacy and public policy initiatives in any or all of these areas will also be considered.

B. Breakout Session Tracks for Days 1 and 2 of the Conference are as follows:

1. Integration of Primary, Specialty, and Non-Medical Aspects of Care

At its fall 2022 "Transitions" Colloquium in Washington, DC, APG featured important sessions on the integration of primary care with oncology, kidney care, and behavioral health care. For the Annual Spring Conference, APG seeks breakout sessions featuring examples of promising practices in the following areas of integration:

- a. Post-acute care
- b. Pharmacy and medication management
- c. Musculoskeletal disease
- d. Cardiology
- e. Gastroenterology
- f. Palliative care and hospice
- g. General considerations for constructing preferred networks of specialist providers, including addressing access issues for example, via e-consults

2. Key Issues In Enabling the Transition to Value

a. Challenges in Clinical Workflow: It is well known among organizations that have made the transition to value that multiple changes in clinical workflow are needed to support different care practices and finances. Challenges remain for even sophisticated organizations, such as in risk adjustment and coding. APG seeks breakouts on promising practices to address issues such as minimizing clinician burden in coding while still producing coding accuracy and enhancing program integrity.

b. Understanding and Adapting to Value-Based Model Changes: In 2023, key changes will occur in the primary value-based payment models of Medicare Advantage, the Medicare Shared Savings Program, ACO REACH, and more. APG seeks sessions on the most important implications of these changes for providers participating in these models.

c. Clinical compensation models that support the transition to value are particularly needed in situations where organizations have the proverbial "feet in two canoes" – i.e., clinicians/organizations paid under both fee-for-service care while also participating in value-based payment models. APG seeks examples of promising practices that organizations have engaged in to create these hybrid compensation models and move clinicians into the value arena.

3. Medicaid, the Safety Net, and Health Equity

As a growing number of states convert their Medicaid programs to managed Medicaid, more APG member organizations are delivering care to Medicaid beneficiaries and dualeligible populations through these models. APG seeks sessions featuring promising/best practices in the following areas:

- a. Considerations for federally qualified health centers entering risk models, and in developing population health management to establish VBP contracts with Medicaid plans.
- b. Partnering with social services providers to address patients' health-related social needs

4. Health Care Without Walls: Breaking Down the Care Silos

- a. "Extensivist" clinics: Bringing hospital-level specialty services to the home and other ambulatory settings
- b. Hospital at Home/Advanced Care at Home: Latest lessons learned
- c. Geriatric urgent care and emergency department care

5. Advocacy and Policy Updates in Value-Based Care

APG and its member organizations are engaged in a number of advocacy activities with respect to federal agencies, Congress, and various states, including California. We regularly brief our members on these activities through our various coalitions and communications, but we and our members are also interested in case studies of advocacy efforts supporting value-based care that have been especially effective in changing policy, at the local, state, or national level.

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