## **Learning Objectives**

At the conclusion of the meeting:

- Medical Directors will be able to identify new opportunities and challenges that new technologies pose for non-profit, regionally-based health plans; more deeply understand innovative approaches to Coordinated Care Organizations and other multi-stakeholder collaboratives working to address health care costs; and analyze what impedes or accelerates value-based payment models to improve care and lower costs.
- Financial Leaders will be able to identify the specific barriers to challenging the status quo in
  health care and collaborative strategies for creating a sustainable health care system; utilize
  organizational best practices for clinical and financial leader collaboration at their respective
  companies; and effectively work with clinical leaders at their respective organizations on
  innovative approaches to address high-cost therapeutics such as esketamine and brexanolone.
- **Pharmacy Directors** will be able to effectively work with financial leaders at their respective organizations on innovative approaches to address high-cost therapeutics such as esketamine and brexanolone; apply effective strategies to optimize clinical outcomes, patient experience and affordability for health plan members; and more thoroughly understand new initiatives and approaches to biosimilar adoption and the lingering barriers to utilization
- **Behavioral Health Leaders** will be able to identify strategies for implementing peer-led interventions to improve the lives of individuals with serious mental illness; confidently respond to mental health parity regulations; and bring back to their respective organizations clinical and financial approaches to improve behavioral health integration.
- Clinical Executives and Quality Leaders will be able to apply best practices for success in valuebased care arrangements; implement best practices for using a variety of data sources and segmentation methods to understand the needs of their populations; and bring back to their respective organizations clinical and financial approaches to improve behavioral health integration.

### **Target Audience**

Participants include ACHP Financial Leaders, Behavioral Health Directors, Pharmacy Directors, Quality Leaders, Medical Directors and Clinical Executives from ACHP member plans.

### **Program Overview**

ACHP is hosting its Clinical Collaborative Meeting in Portland, OR on October 23-24. On the first day of the meeting, all attendees will gather to learn, share and network through joint discussions about core elements of a sustainable health care system, a variety of perspectives on peer-led interventions, and organizational best practices on collaborations addressing cost of care. In breakout sessions, participants will join in an in-depth discussion of mental health parity, interact with Civica Rx's CCO about ways ACHP members can engage with disruptive drug pricing innovations, and share best practices around using segmentation data and methods to understand populations.

The second day will begin with feature Dr. Molly' Coye's keynote presentation on how digital health is transforming consumer and provider interactions, followed by a panel discussion around creating shared value by addressing social needs. Then breakout participants will share their experiences with value-based payment models and ways to incentivize behavioral health integration.

## **Faculty Listing**

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# **Accreditation and Credit Designation**

In support of improving patient care, this activity has been planned and implemented by the University of Pittsburgh and the Alliance of Community Health Plans. The University of Pittsburgh is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

## **Physicians**

The University of Pittsburgh School of Medicine designates this live activity for a maximum of 9.5  $\,$  AMA  $\,$  PRA  $\,$  Category 1  $\,$  Credits  $\,$  The Physicians should only claim credit commensurate with the extent of their participation in the activity.

### **Pharmacists**

This knowledge-based activity provides 9.5 contact hours of continuing pharmacy education credit.

#### **Nurses and Nurse Practitioners**

The maximum number of hours awarded for this Continuing Nursing Education activity is *9.5 contact hours*.

## Other health care professionals

Other health care professionals will receive a certificate of attendance confirming the number of contact hours commensurate with the extent of participation in this activity.

# How do I get my credits?

The UPMC Center for Continuing Education in the Health Sciences (CCEHS) continuing education learning portal, <a href="http://cce.upmc.com">http://cce.upmc.com</a>, is used to register, claim and track all your continuing education credits. Certificates will be available to download and stored for future reference.

To receive credit, you will be required to login, complete the course evaluation and claim credit within **14 days of the activity**. If you are a new user, click "Register" to create a new account. The activity will be added to your **Pending Activities** and accessible on the first day of the activity. Upon completion, certificates will be available to download and stored for future reference in your **Completed Activities**.

**Attention Pharmacists**: CCEHS will upload your credits to the NABP within 30 days of your completion of this activity, including claiming credit and completing the course evaluation. The NABP does not allow credits to be uploaded after 60 days of the activity start date.

To answer common questions or for step-by-step instructions, please visit the **FAQs** available on the CCEHS Learning Portal.

# **Faculty Disclosure**

All individuals in a position to control the content of this education activity are required to disclose all relevant financial relationships with any proprietary entity producing, marketing, re-selling, or distributing health care goods or services, used on, or consumed by, patients.

## The following relevant financial relationships were disclosed:

- John Brekke, Ph.D, USC and Pacific Clinics, Joint Negotiated Proprietary Interest
- George Isham, MD, Center for Health Economics and Policy at FTI Consulting, Consultant and Member of the Advisory Board / ACHP, Senior Advisor and Consultant / Martin's Point Health Care, Member of the Board of Directors
- Russ Kuzel, MD, Rigel Pharmaceuticals, Inc., Member of Advisory Board / Ilumina, Site Visitor
- Sarita Mohanty, MD, MPH, MBA, COPE Health Solutions, **Member of the Board of Directors**
- Molly Coye, MD, MPH; AVIA, Executive Sponsor of Medicaid Transformation, Executive in Residence / 98point6, Member of the Medical Advisory Board / ConsejoSano, Member of the Board of Directors / Aetna, Member of the Board of Directors 2005-2018 / WiserCare, Member of Advisory Board / Babyscripts, Member of Advisory Board / Ginger, Member of the Board of Directors

No other planners, members of the planning committee, speakers, presenters, authors, content reviewers and/or anyone else in a position to control the content of this education activity have relevant financial relationships to disclose.

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