# Advancing Your Personalized Learning Plan

An ACP Education Update

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Louisiana Chapter 2023 Annual Scientific Meeting March 4, 2023





## **Disclosure of Interests**

Dr. Chick has no interests to disclose relevant to this presentation.

## **Your ACP Medical Education Division**

#### **Instructional Design & Events**

- Internal Medicine Meeting
  - Scientific Program & Pre-Courses
- Clinical Skills
  - Clinical Skills Center & IMM Workshops
  - Waxman Scholars
  - POCUS
  - Special events
- Virtual Live & Hybrid courses
  - Board Review Courses
  - Course Recordings
  - Special Events
- Instructional Design
  - Innovations & Multimedia
  - Grants
  - Resolution deliverables
- Online Learning Center

#### **Research & CME Compliance**

- College Research
  - Surveys (e.g., Members, ITE PDs/residents)
  - Member demographics
  - DEI landscape
  - Research consultations & projects
  - IM Insider Research Panel
- CME/MOC Compliance & Accreditation
  - Chapters
  - National

#### **Assessment & Education Programs**

- In-Training Examination
- MKSAP 19, ACP MKSAP
- Board Prep Curriculum
- Board Review Course Curriculum

### **Goal: Feeding Our Purpose Through Longitudinal Learning**

#### **Objectives:**

- Meet CME needs with ACP's Online Learning Center
- Identify High-Yield ACP Learning Resources
  - POCUS
  - Coding
  - Pain Management
  - Obesity Management
  - Podcasts
  - And more!
- Prepare for Examinations
- Explore the MKSAP 19 Learning Plan
- Advocate for education policy improvements
- Get excited for San Diego!

# Need CME/MOC?

**ACP Online Learning Center** 

http://acponline.org/olc







ABOUT ACP | Hello, Davoren 4



Free Member

**Benefit CME** 

**MEMBERSHIP** 

CME & MOC

**MEETINGS & COURSES** 

CLINICAL INFORMATION

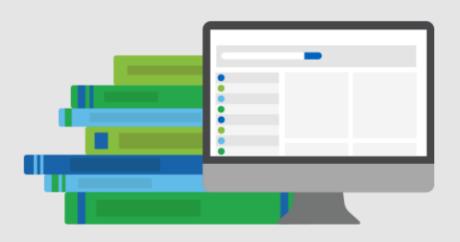
PRACTICE RESOURCES

HOME > CME & MOC > ONLINE LEARNING CENTER

# Online Learning Center

Explore a wide-ranging library of online CME and MOC activities, aimed at improving your knowledge and practice.







Pin to launchpad 🌃

Search

Format

Product Name

State CME Requirements

Search the Online Learning Center

SEARCH

#### CME Requirements for:

#### Louisiana



20 hours of Category 1 CME credits annually. Louisiana physicians must complete a board sponsored/approved orientation program within their first renewal period following licensure.

All practitioners with a Controlled Dangerous Substance license have additional requirements.

 Drug diversion training, best prescribing practices of controlled substances, appropriate treatment for addiction (3 hours of CME within their first license renewal term)

The following categories contain activities that may be related to these requirements. Please review the Louisiana State Board of Examiners site to determine the eligibility of individual activities before completing. All activities on the Online Learning Center are accredited by the ACCME for AMA PRA Category 1 credit(s)<sup>TM</sup> and will help meet your state requirements.

Opioid Therapy 🖄

Substance Use Disorder 🖄





Diagnostic Reasoning, Tools, Techniques



Endocrinology, Diabetes, and Metabolism



Gastroenterology and Hepatology



General Internal Medicine



Hematology and Oncology



Hospital Medicine



Infectious Disease



Nephrology and Urology



Neurology



Psychiatry and Mental Health



Pulmonary Disease and Critical Care



Rheumatology and Orthopedics



The Profession

## Point of Care Ultrasound (POCUS) for Internal Medicine

From beginner to advanced, refine your procedural skills to effectively implement ultrasound exams into your practice with ACP's dynamic and comprehensive POCUS series. Seven foundational self-paced courses have received a 2023 update, developed in collaboration with over 14 national experts. Six additional advanced courses are also available, free to members. Start on your POCUS Pathway today!

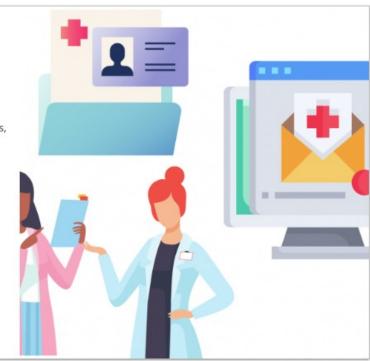
View Hub



## Coding for Clinicians | Fully updated for 2023!

ACP's Coding for Clinicians is a subscription-based training program that teaches you to code smarter and more efficiently—saving time, driving accuracy, and optimizing payments. Thirteen regularly updated self-paced activities cover a wide range of topics, including non face-to-face services, coding modifiers, federal guidance for documentation, and inpatient and outpatient categories. Newly updated 2023 coding guidance includes inpatient coding based on updated medical decision-making guidance, the new unified hospital inpatient/observation evaluation and management code set, new time-based coding thresholds and prolonged service coding, and major changes to inpatient and outpatient consultation coding. The complete program offers a year of access to learning modules and support materials.

View Program 🗗



# Continuous Glucose Monitoring: Going Beyond A1C To Improve Type 2 Diabetes Management

RESUME LEARNING

DETAILS



# Want to expand your skills?

**ACP Point-of-Care Ultrasound** 

http://acponline.org/pocus





# ACP POCUS Step 1: Foundational Learning Online & In-Person

- 1. Obtaining Adequate Clinical Images for Interpretation
- 2. Lung Ultrasound
- 3. Focused Cardiac Imaging
- 4. Intra-Abdominal Free Fluid
- 5. Urinary System
- 6. Deep Venous Thrombosis
- 7. Patient-Centered Scanning



Free

Member

**Benefit** 

# **ACP POCUS Step 2: Skills Mentorship**

- Livestream, Virtual Course
- 6 months: May September
  - Choose your own schedule
- 1:1 personalized training with expert mentors
- Customized to your needs
- POCUS devices available to loan
- Directly observed feedback while scanning live models

ACP POCUS Step 3: Advanced Learning Online & In-Person

- Skin/Soft Tissue and Musculoskeletal
- 9. Abdominal Aortic Aneurysm
- 10. Gallbladder
- 11. Lower Extremity Musculoskeletal
- 12. Upper Extremity Musculoskeletal
- 13. PEARLS An Ultrasound Physical Examination

Free Member Benefit



Become proficient in practice. Reserve your spot today!

Deep Member Discounts

# Need to optimize payment?

**ACP Coding For Clinicians** 

http://acponline.org/coding







# Keep up with 2021, 2023 Coding Changes

acponline.org/coding

# ACP Coding for Clinicians

- Diagnosis Coding and Core Knowledge
- 2. Hierarchical Condition Categories and Value-Based Payment
- Inpatient Evaluation and Management (E/M)
- 4. Inpatient Special Topics
- 5. Pediatric Inpatient Care

- 6. Outpatient Services
- 7. Outpatient Prolonged Services
- 8. Outpatient Consultation
- 9. Preventive Visits
- 10. Concurrent Procedures and E/M
- 11. Concurrent Preventive and E/M
- 12. Guidance for Teachers, Residents, and Students
- 13. Chronic and Transitional Care Management



#### **Business Resources**

Coding

**Coding for Clinicians** 

**Payment** 

Practice Transformation

Medical Lab Evaluation

Telehealth Guidance & Resources

**Health Information Technology** 

Office Management

Informational Webinars

HOME > PRACTICE RESOURCES > BUSINESS RESOURCES > CODING

## Coding

Beginner and advanced medical coding resources, including member exclusive content and ACP's Coding for Clinicians subscription series.

Improve your coding skills to represent the true complexity of your patient care and secure appropriate compensation for your professional services with ACP coding resources.



Get the most out of ACP's coding resource suite by subscribing to ACP Coding for Clinicians, providing interactive learning modules to help you code smarter and ensure maximum payment. CME/MOC available.

LEARN MORE ABOUT SUBSCRIBING

- Diagnosis Coding and Core Knowledge
- Hierarchical Condition Categories and Value-Based Payment
- ✓ Inpatient Evaluation and Management

- ✓ Inpatient Special Topics
- ✓ Pediatric Inpatient Care
- Outpatient Services

#### **Learning Module**

Select outpatient service codes 99202-99205 and 99211-99215 using the new 2021 guidelines.

Begin 🖾

NOT SUBSCRIBED? LEARN MORE

#### **Guidance and Tools**

- Outpatient Evaluation and Management Codes ACP MEMBER EXCLUSIVE
- Primary Care Do's and Don'ts for Clinical Documentation 📴
- Medical Specialty Do's and Don'ts for Clinical Documentation
- Telehealth
- Video Visits
- Telephone Visits
- COVID-19
- COVID-19 Coding and Billing ACP MEMBER EXCLUSIVE

#### Video

 Outpatient Coding: Getting Paid for What You Do
 SUBSCRIBERS ONLY

Outpatient Prolonged Services

### Includes Free Member Content

## Remote Physiologic Monitoring Codes



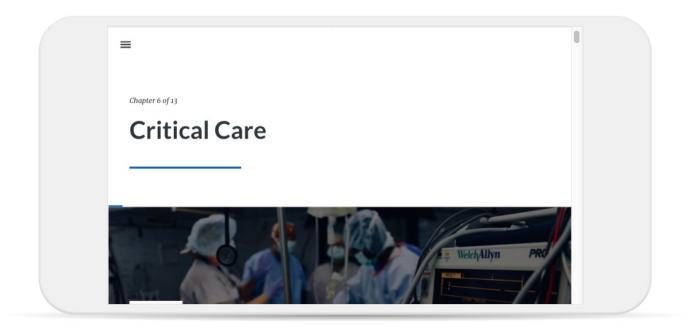
- Preventive Visits
- Concurrent Procedures and E/M Services
- **∨** Guidance for Teachers, Residents, and Students
- Chronic and Transitional Care Management

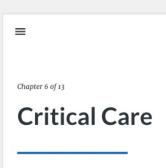
#### **ACP Advocacy to Improve Physician Payment**

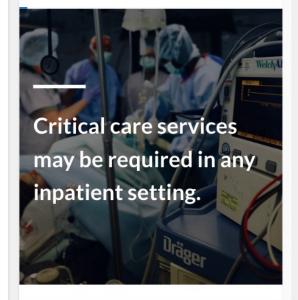
Learn about ACP's advocacy focused on improving physician payment and the RVS Update Committee (RUC) process in which ACP participates to help develop relative value recommendations for codes.

- Physician Fee Schedule and Quality Payment Program
  - ACP recommendations reflected in positive CMS 2022 Physician Fee Schedule changes and in new federal programs
  - o Summary of 2022 Medicare Physician Fee Schedule and Quality Payment Program Final Rule 📴
  - o Read ACP's Comments on 2022 Final Physician Fee Schedule & Quality Payment Program Rule 📴
- Evaluation and Management
  - Opcumentation Guidance from "State of the Note" Summit (Jan. Apr. 2021)
- Understanding the RUC Process
  - Webinar: The Relationship Between ACP and Other Specialty Societies Serving on the RUC ACP MEMBER EXCLUSIVE

# Learning Series in Device-Responsive Formats









#### Self-Paced, Interactive Learning

- On-demand, online access
- Physician-to-physician perspective
- Case-based examples
- Resources, guidance, and tools



#### **Documentation Case Study**

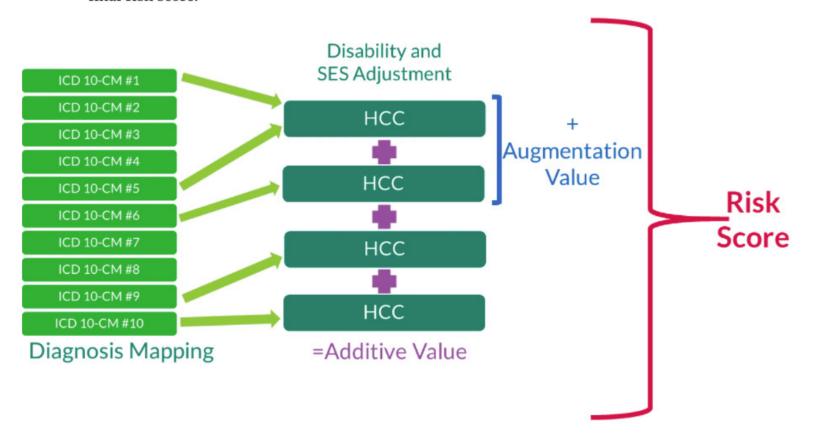
#### Mr. Patel

A 56-year-old man presents with left lower quadrant abdominal pain.



#### Risk Score Calculation

Each HCC is assigned an administrative value reflecting clinical risk. The value is then adjusted based on demographic factors, including disability status and whether the person has a low socioeconomic status. Adjusted HCC values are additive. On top of this, certain conditions are known to be particularly risky when combined. These HCC combinations trigger an augmentation value when reported in the same year. The final HCCs, demographic adjustments, additive and augmented values result in Mr. Davis's final risk score.



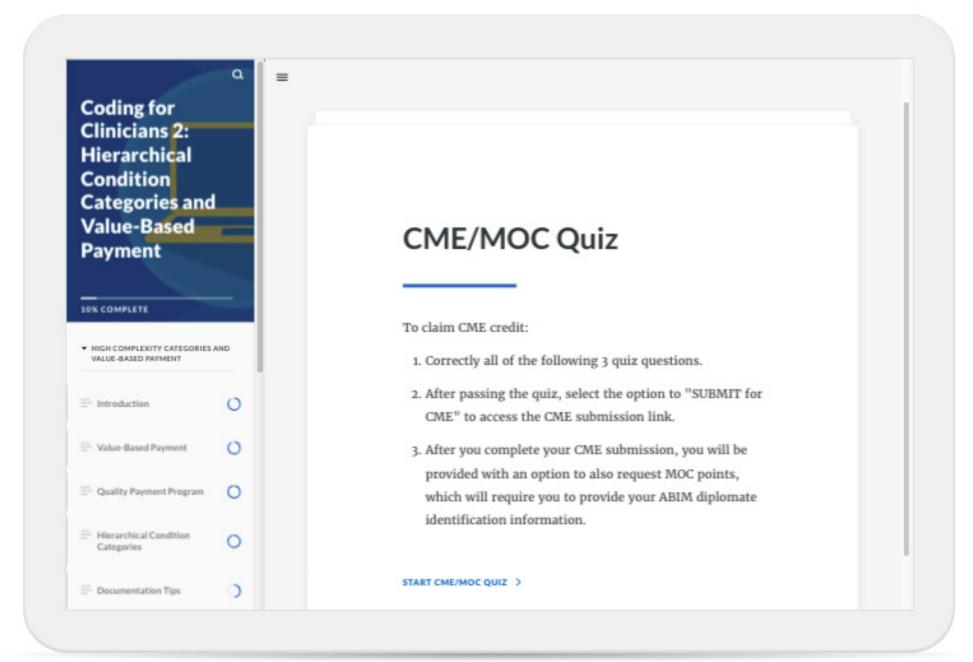
# ACP Coding for Clinicians

### **Practical Pearls and Key Points**

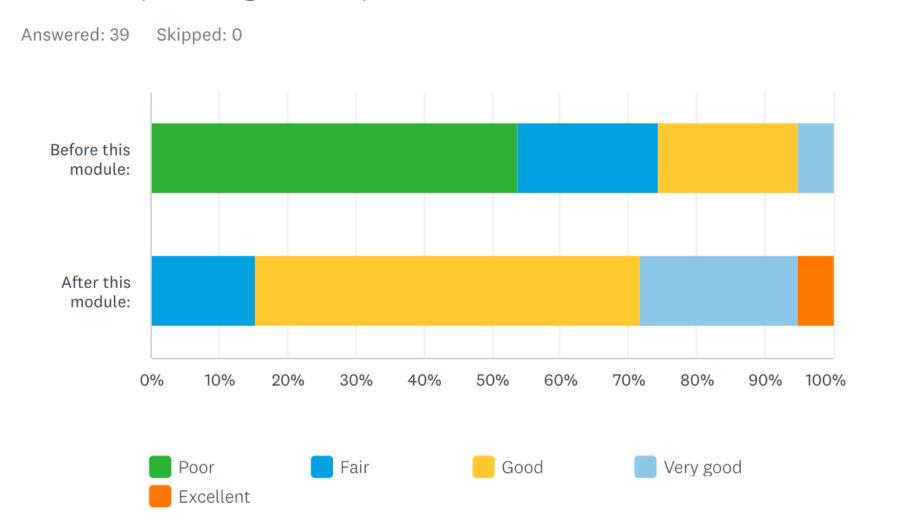
i If SMBP analysis is performed on the same day that a patient presents for an E/M visit to the same billing professional, the SMBP analysis should be considered as part of the E/M and not billed separately.

#### **i** Key Points:

- Ventilator machine management codes are used to report ventilator management that is not part of comprehensive E/M or critical care services.
- The initial day ventilator management code refers to the first day of ventilator initiation for a newly ventilated patient, or the first day of ventilator setting assessment and adjustment for a chronically



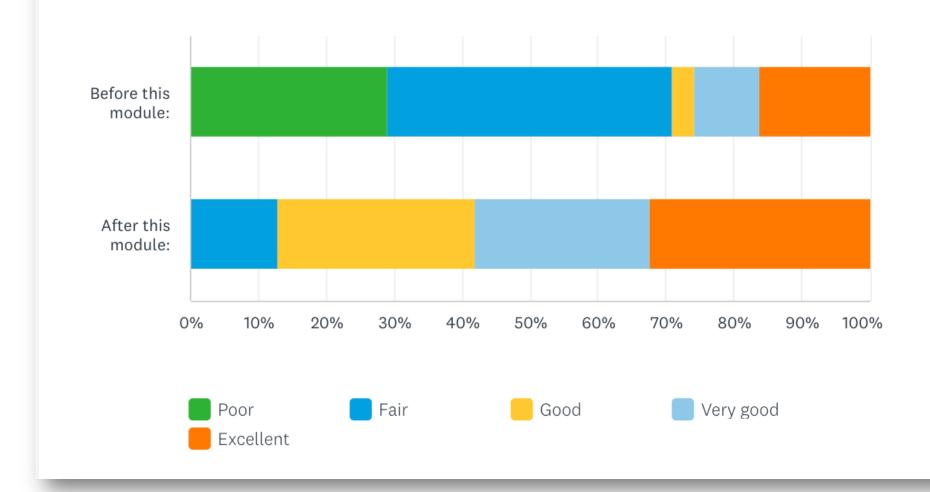
Please rate you ability to report CPT codes for non-faceto-face prolonged outpatient services.





# Please rate you ability to report critical care or ventilator management







# ACP Coding for Clinicians

"This is one of the only inpatient coding CME modules I have ever seen. And I have been looking for one for two years! THANK YOU!"

#### Nursing Facility Services

	Initial nursi	ng rac		205	99306
$\overline{}$	99304		99305 Moderate		High
	Straightforwa	rd/			
MDM complexity	Low	_	-	5 mins	45 mins
Time	25 mins	25 mins 35 mins Subsequent nursing facility care			
	Subsequent	nursi	ng taci	99309	99310
	99307	993	308		High
MDM	Straight-	L	wo	Moderate	
Complexity	forward	+	5 mins 30 mins		45 mi
Comp	10 mins	15	mins	56	
Time					

#### **Home and Domiciliary Visits**

	N	lew Patien	t	
		99342	99344	99345
	99341	99342		Moderate
MDM	Straight-	Low	Moderate	Moderate
Complexity	forward		60 mins	75 mins
	15 mins 30 mins			
Time	Est	ablished l	Patient	99350
		99348		77300
	99347	+-	_	Moderate
MDM Complexity	Straight	Low	Moderate	
	forward		as 40 mins	60 mins
Comp	20 mins	30 mi	ns 40 m	

#### natal Critical Care Codes

tal Critical Care Co
Critical care transport (30-74 mins)  Each additional 30 minutes critical care transport
Each additional 30 trimes  Initial inpatient neonatal critical care
Subsequent day neonatal critical care (29 days to 24 months)  Initial day critical care (29 days to 24 months)
Subsequent day critical care (2 years through 5 years) Initial day critical care (2 years through 5 years)
Initial day critical care (2 years through 5 years)

#### **Neonatal Intensive Care Codes**

	Initial day intensive care (neonate to 28 days)
99477	Initial day intensive care (necklary) Subsequent intensive care day (<1500 g) Subsequent intensive care day (1500 to 2500 g)
99478	Subsequent interior day (1500 to 2500 g)
99479	Subsequent intensive care day (2501 to 5000 g)

#### **Critical Care Codes**

	CMS Guidance	
	and inpatient	
	E/M code (including prolonged services)	
99291	99291	
99291 + 99292	99291 + 99292	
s 99291 + 99292 x2	2 99291 + 99292 x2	
+ 99292 X	3	
	4 99291 + 99292 x3	
	prolonged services, 99291	

#### Ventilator Management\*

	ator Maliage Management
94002	Initial day of ventilator management Subsequent day of ventilator management Subsequent day of ventilator management
94003	Subsequent day of ventilator management  Nursing home day of ventilator management  and part of comprehensive E/M or
94004	Nursing home day of ventuate.  Nursing home day of ventuate.

#### Critical Care Bundled Procedures\*

Critica	-	are During measurements
93561 93562	Inte	erpretation of cardiac output measurements
94760 94761 94762	\$8	oninvasive ear or pulse oximetry for oxygen turation
71045 71046	R	adiologic examination of chest
36000 3641 3641 3659 3660	5	Peripheral vascular access procedures
437	52	Naso- or oro-gastric tube placement using fluoroscopic guidance Insertion of stomach tube and aspirations of gastric
437	53	contents
929	53	Temporary transcutaneous pacing  Jesses and collection and interpretation of physiologic  Jesses and collection and physiologic  Jesses
В	000	gases and collection and interpretation of polyder data (ECG, blood pressure, hematologic data) data (ECG, blood pressure, hematologic data)

\*Do not report separately. Report time in critical care tally

ACP Coding for Clinicians

#### Inpatient, Observation, and **Facility Evaluation and Management Codes**

Selecting and Documenting Appropriate Levels of Services



document, but it is no substitute for the original guidelines. Refer

eserved. CPT® is a registered trademark of the American reserved. LPT \* is a registered trademark of the American Medical Association (AMA). All references to CPT\* are for educational purposes only.

# acponline.org/coding

- *Updated* tools for 2023
- **New** group practice subscription rates

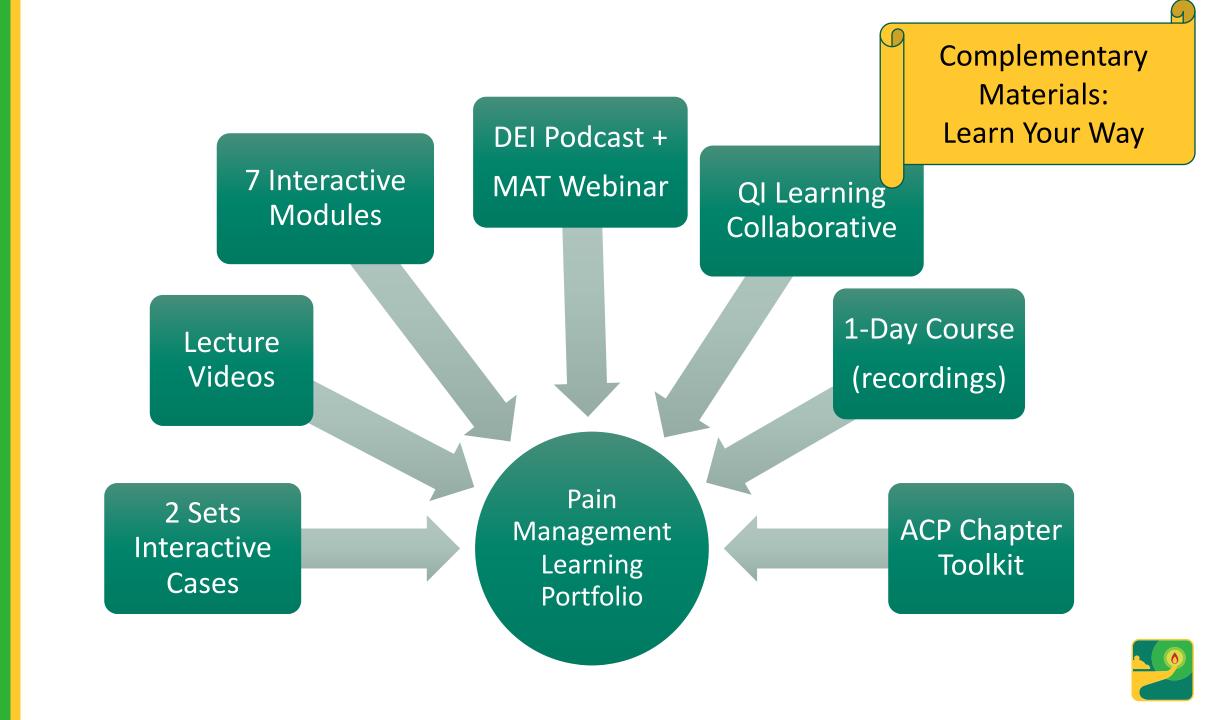
# Have patients struggling with pain management?

**ACP Pain Hub** 

http://acponline.org/painhub







### **ACP Pain Management Advisory Group & Peer Reviewers**

Patient and Family Advisors
Physical Therapists
Pain Management Physicians
General Internal Medicine Physicians
Addiction Medicine IM Subspecialists
Addiction Consult Liaison Nurses
Clinical Pharmacists
Medical Illustrators
Medical Education Instructional Designers



MEMBERSHIP CME & MOC

**MEETINGS & COURSES** 

CLINICAL INFORMATION

# Clinical Resources & Products

Coronavirus Disease 2019 (COVID-19)

**Adult Immunization** 

DynaMed

**End of Life Care** 

**Patient Priorities Care** 

**Pain Management Learning Hub** 

HOME > CLINICAL INFORMATION > CLINICAL RESOURCES & PRODUCTS > PAIN MANAGEMENT LEARNING HUB

# Pain Management Learning Hub

Health care professionals have long struggled to effectively assess and manage pain within the broader context of clinical uncertainty, biopsychosocial complexity, and societal stigma. The staggering rise of opioid use and misuse has added even more urgency to the need for appropriate and effective pain management.

Explore these peer-to-peer learning materials to advance your skills in pain management.





#### The ACP Pain Management Learning Series

This series consists of 7 core modules and 2 sets of case studies. The core modules use evidence-based and patient-centered pain management principles to help physicians assess and manage pain. The sets of case studies provide opportunities to practice skills necessary for pain assessment, diagnostic differentials, treatment plans, and patient-centered

#### 0% COMPLETE

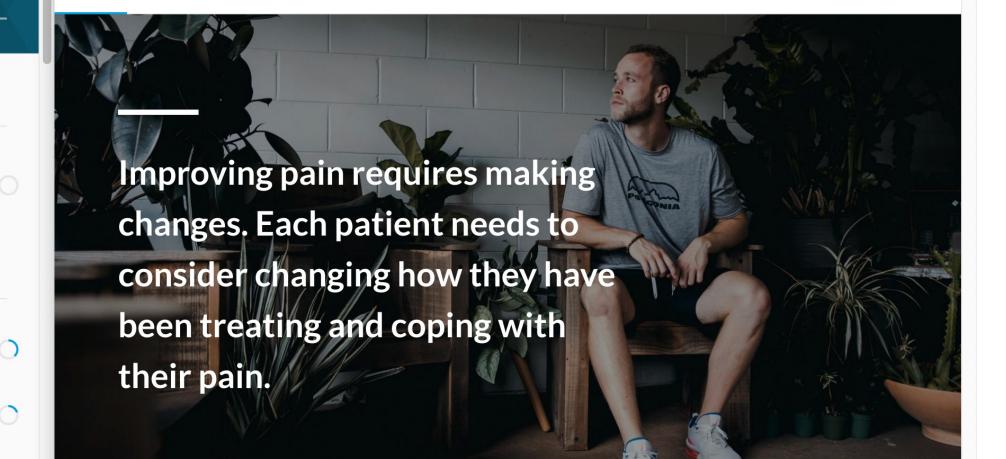
- ▼ GENERAL INFORMATION, CME, AND INTRODUCTION
- Information and CME Instructions

- **▼ PAIN MANAGEMENT PRINCIPLES**
- Introduction
- Target the Pain Types



Chapter 8 of 13

## Help Patients Make Changes



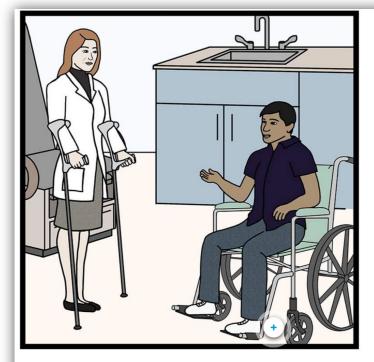
### **Integrated Videos & Audio**

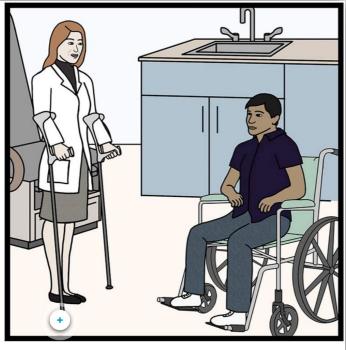
A Patient on What Makes a Moment With a Doctor (0:43 min)



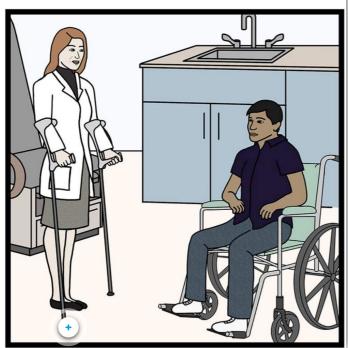
# Graphic Medicine Communication Interactions

& Interactive Medical Illustrations









### **Practical Pearls and Key Points**

Pain Pearl: Because change takes time, consider making a specific note in your patient's chart about the stage of change they seem to be in. Note the results of any discussions. For patients in contemplation stage or later, note the patient's intended current plan to move forward along the stages of change. On the next visit, any clinician will be able to resume patient-centered motivational interviewing and change management counseling.

#### (i) Key Points

- The experience of pain is inherently subjective, varying significantly from person to person, making assessment of patients with chronic pain more challenging.
- For a patient who has anchored on 1 request and has difficulty considering potentially more beneficial approaches, FRUP and the 5 A's can assist in refocusing without undermining the physician-patient relationship.

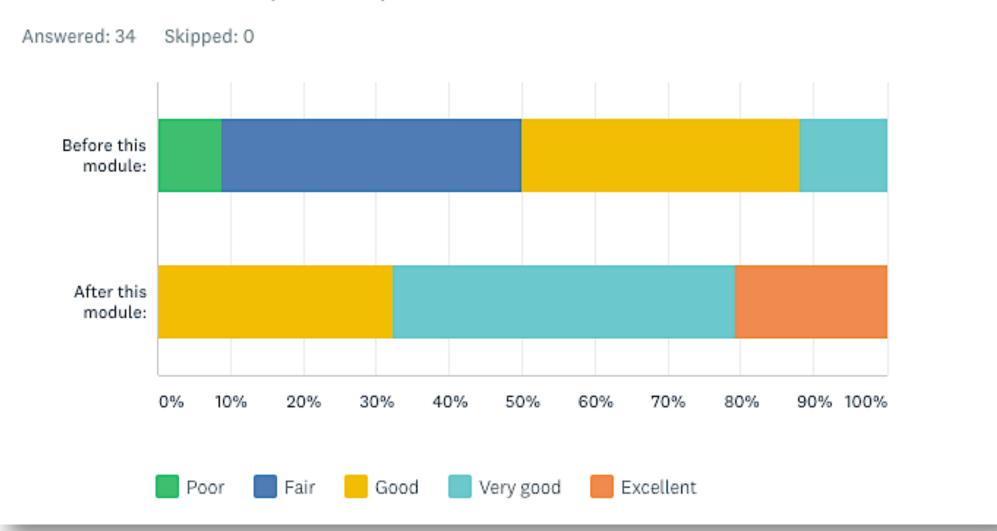
### Reflections: Before, During, and After

#### Reflection

In your practice, which groups do you think are most affected by implicit bias?

What are some ways you might improve health equity, especially in the area of pain management?

Please rate your ability to discuss treatment options for opioid use disorder, including psychosocial interventions, methadone, buprenorphine, and naltrexone.



# **ACP Pain Management Cases: Low Back Pain**

START LEARNING

DETAILS V



These 3 case studies provide interactive training on assessment and treatment to improve pain, function, and mood for patients with low back pain.

## **Clinical Cases**

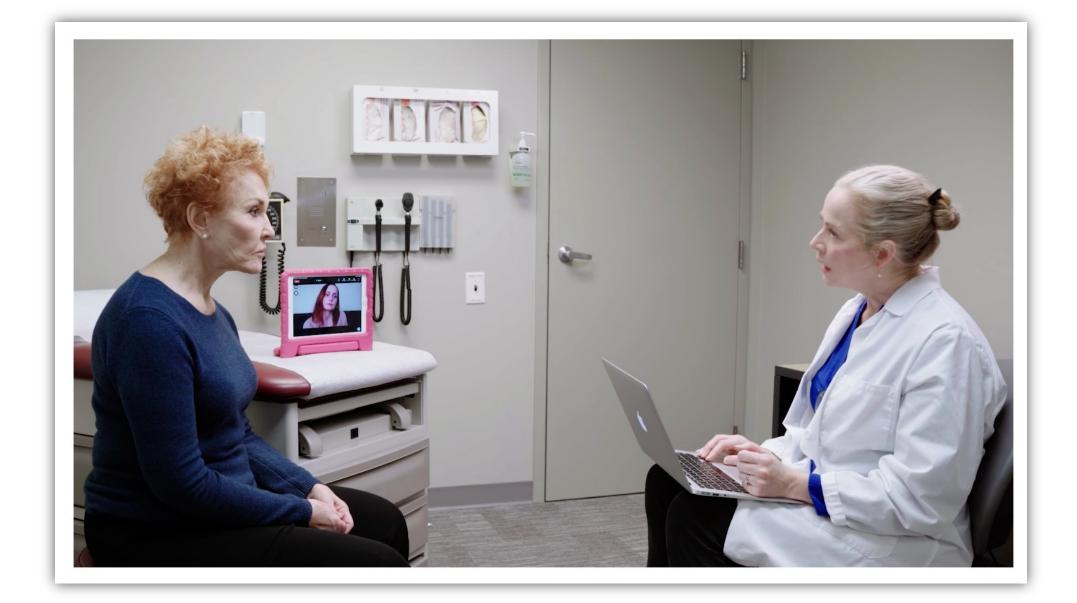
- Knee Pain
- Back Pain

### **Case Core Content: Physical Examination Videos**





### **Case Communication Videos**





Free Member Benefit

# How about obesity management?

**ACP Obesity Hub** 

http://acponline.org/obesityhub





## Interprofessional & Multidisciplinary Design

Multidisciplinary team-based care is more likely to produce significant weight loss that physician counseling alone.

ACP Obesity Management Advisory Group

- General internal medicine
- Obesity medicine
- Nutrition & dietetics
- Bariatric surgery
- Psychology
- Pharmacy
- Patient and family advocacy
- Health policy



# acponline.org/obesityhub

MEMBERSHIP

CME & MOC

**MEETINGS & COURSES** 

CLINICAL INFORMATION

PRACTICE RESOURCES

ADVOCACY

**™** STORE

# Clinical Resources & Products

Coronavirus Disease 2019 (COVID-19)

Adult Immunization

DynaMed

End of Life Care

**Multiple Chronic Conditions** 

**Obesity Management Learning Hub** 

Pain Management Learning Hub

HOME > CLINICAL INFORMATION > CLINICAL RESOURCES & PRODUCTS > OBESITY MANAGEMENT LEARNING HUB

### Obesity Management Learning Hub

The US Preventive Services Task Force (USPSTF) recommends that physicians offer intensive counseling to adults with obesity to promote weight loss. Yet, many physicians do not feel they have adequate training to provide it. ACP has developed a multifaceted approach to increase confidence in providing counseling and treatment to patients with overweight and obesity by developing a curriculum that addresses multiple aspects of patient engagement and care to assure a team-based approach to managing obesity.





#### The ACP Obesity Management Learning Series

This comprehensive, up-to-date learning series provides practical guidance to support physicians and their teams in treating patients with obesity. Three web-based, interactive learning activities address lifestyle modification, pharmacologic therapy, and surgical intervention. Patient education resources are included to bolster physician recommendations and support patient success.



#### The ACP Obesity Management Learning Series

This comprehensive, up-to-date learning series provides practical guidance to support physicians and their teams in treating patients with obesity. Three web-based, interactive learning activities address lifestyle modification, pharmacologic therapy, and surgical intervention. Patient education resources are included to bolster physician recommendations and support patient success.

- Module 1: Lifestyle Modification
- Module 2: Pharmacotherapy
- Module 3: Bariatric Surgery



### **ACP Obesity Patient Education Materials**

These ACP-produced patient education handouts were made for physicians and their teams to share with their patients in order to bolster physician recommendations and support patient success.

- Lifestyle and Nutrition Handout
- Lifestyle and Nutrition Checklist
- Weight Loss Surgery
- Medication and Weight Loss
- Who's Who on the Obesity Care Team



### The DEI Shift Podcast: Obesity Mini-Series

This 2-part mini-series on obesity is produced for ACP by The DEI Shift podcast . The series explores topics related to obesity, diversity, equity, and inclusion. These podcasts are supported by an educational grant from Novo Nordisk Inc.

CME/MOC credit are free to ACP Members. Nonmembers may purchase access to claim CME/MOC credit for each podcast for \$25.

Episode 1: "Defining Obesity, Challenging Weight Bias" .5 CME

This episode, featuring Dr. Fatima Cody
Stanford, digs deep into historical, structural,
and individual bias in care of patients with
obesity.

Listen to Podcast

Episode 2: "Weight and Cultural Considerations"

.5 CME

This episode explores how physicians can incorporate culture and social determinants as they partner with patients with obesity. Featuring commentary from Dr. Shreela Sharma and patient representative Ms. Latoshia Rouse.

Listen to Podcast

# Most learners (92% or greater) reported positive progress towards meeting each learning objective across all 3 modules.

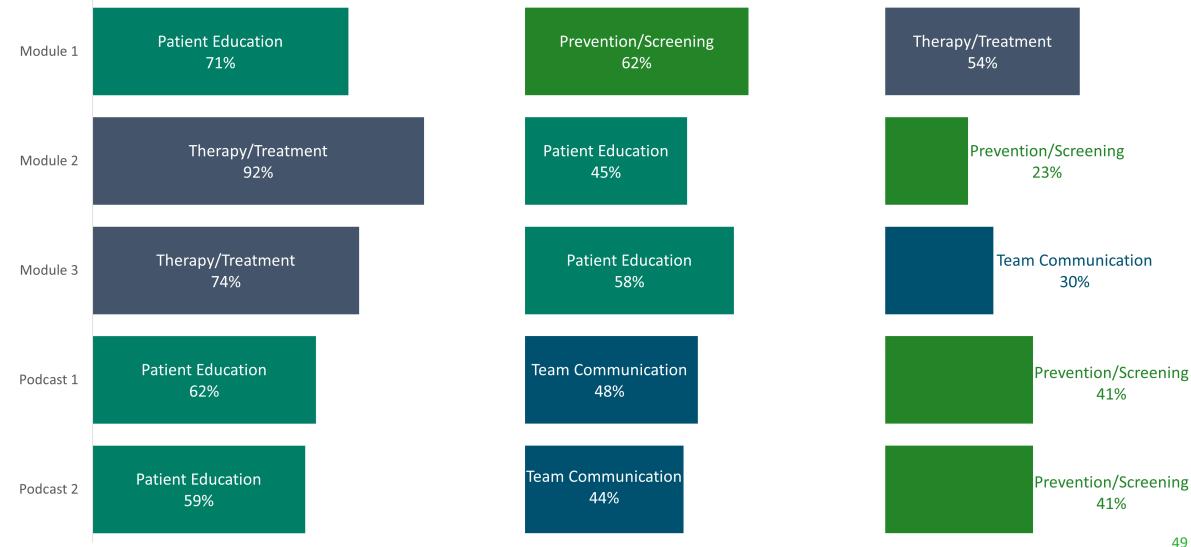


Greatest gain occurred in learning related to identifying management approaches for inadequate weight loss or weight regain following bariatric surgery.

LO1.1 LO1.2 LO1.3 LO1.4 LO1.5 LO2.1 LO2.2 LO2.3 LO2.4 LO3.1 LO3.2 LO3.3 LO3.4

• Before • After

### Most learners (82% or greater) reported plans to implement changes to practice/patient care after completing the modules and podcasts.



### May, 2022

### **Annals of Internal Medicine®**

Care of the Patient
After Metabolic and
Bariatric Surgery

Care in the Early

eight loss surgery, also known as metabolic and bariatric surgery (MBS), is an effective weight loss treatment and is associated with reduced mortality and improvements in obesity-related health conditions and quality of life. Postsurgical anatomical and physiologic changes include decreased absorption of micronutrients and

**Long-Term Follow-up Care** 

**Postoperative Period** 



CME/MOC Free Member Benefit

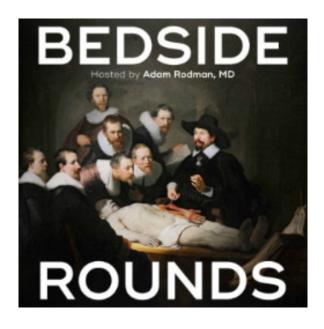
No time to sit still?

**ACP Sponsored Podcasts** 

http://acponline.org/podcasts













Deep Member Discounts

Preparing For an Exam?

**ACP Board Prep Resources** 

http://acponline.org/boardprep





## **Board Review Support**

### **Board Review Courses: 5 days On Location or Virtual**

- High frequency, high importance topics ABIM exam blueprint
- Interactive, case-based, and expert clinician-educator team
- Tips on test-taking strategies
- Complete e-syllabus + 6 months access to course recordings
- Ongoing, real-time written Q and A with faculty

### **Board Review Course Recordings**

39 hours divided into 5-10 min single-question interactive segments

### **Board Prep Curriculum** for residency programs

- Slide decks support 69 planned lectures across high importance exam topics
- Ongoing, real-time written Q and A with faculty

IMM 2023
Pre-Course:
ACP Rapid
Review

Deep Member Discounts

Ready for a comprehensive personal MKSAP Learning Plan?

MKSAP 19 ... and ACP MKSAP





# ACP MKSAP 19



# ACP MKSAP 19

# **New Features!**

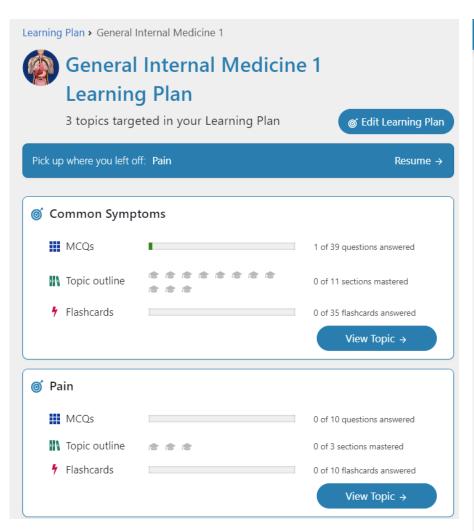
- Complete Green format
- Enhanced Text
  - Board Basics integration
  - Embedded lab values
  - Multimedia enhancements
  - Multicolor personal text highlighting
- Question Bank
  - New "Quick Qs"
  - New Shuffle Mode
  - New Extension Questions

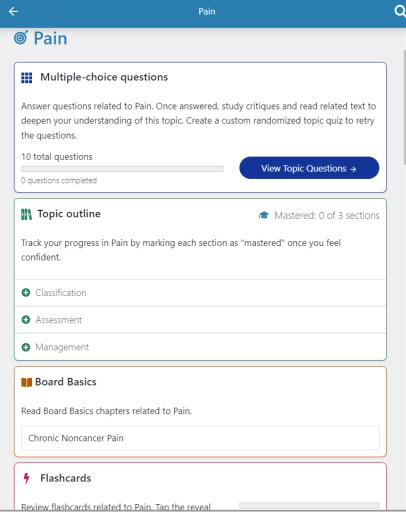
- Personalized Learning Plan
  - Integrated ACP Learning Links
  - Collated Key Points, notes, highlights
  - New IM-ITE Score Upload Opt-in
- Earn-as-You-Go CME
- Modernized Guidance
  - Board Exam Topic Guide
  - How-To videos
  - MKSAP and the LKA
  - Enhanced search

In development: unlockable timed questions & achievement certificate



## **Individualized Learning Plan**





Access all topicspecific MKSAP content

Review topics in depth

Access collected Key Points, collated personal notes and highlights

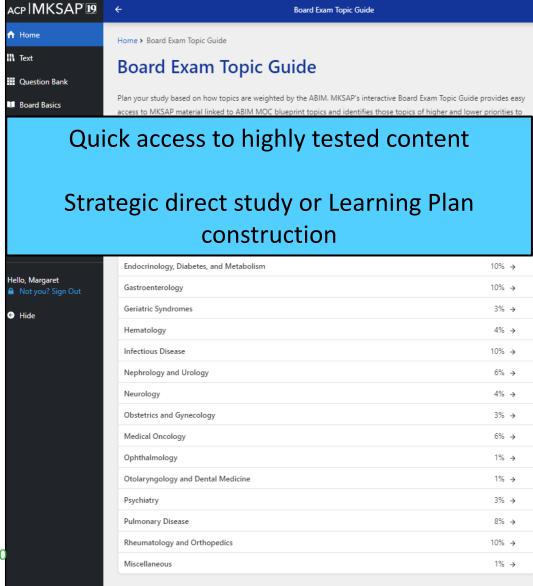
Track progress towards goals

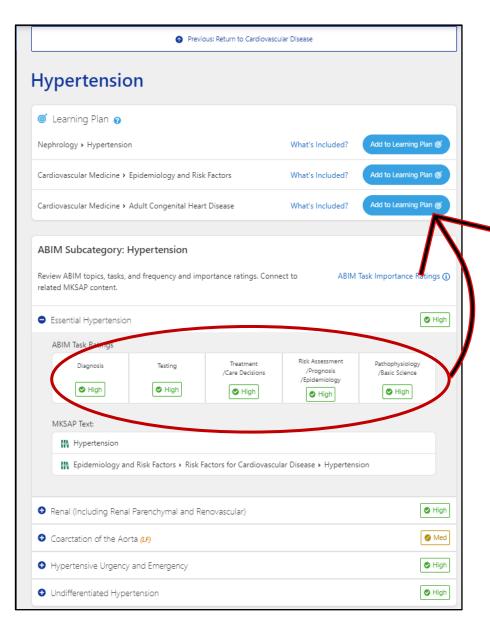
# **Individualized Learning Plan**

& Learning Links for Pain learning links from across ACP ACP Pain Management 1: Pain Fundamentals ACP Pain Management 2: Pain Assessment ACP Pain Management 3: Pain Management Principles 囨 ACP Pain Management 4: Nonpharmacologic Therapies 函 ACP Pain Management 5: Nonopioid Pharmacotherapy 函 ACP Pain Management 6: Opioid Therapy 函 ACP Pain Management: Chronic Pain: Beyond Opioids 函 ACP Video Management of Acute Pain From Non–Low Back Musculoskeletal Injuries: A Systematic Review and Network Meta-analysis of Randomized Trials (2020) 函 ACP Article Non-Pharmacological and Pharmacological Management of Acute Pain from Non-Low Back, Musculoskeletal Injuries in Adults: A Clinical Guideline from the 函 American College of Physicians and American Academy of Family Physicians (2020) and Pharmacologic Management of Acute Pain From Non-Low Back, Musculoskeletal Injuries in Adults: A Clinical Guideline From the American College of Physicians and American Academy of Family Physicians Annals Guideline Optimizing Pain Management in an Era of Opioid De-escalation: 2021 Video Recordings Package 函 ACP Video Predictors of Prolonged Opioid Use After Initial Prescription for Acute Musculoskeletal Injuries in Adults: A Systematic Review and Meta-analysis of Observational Studies (2020) ACP Article The DEI Shift: Addressing Bias and Disparities in Pain Management ACP Podcast

Access topic-related

### **Board Exam Topic Guide**





### **IM-ITE Scores Upload**

# ♣ 2021 Internal Medicine In-Training Examination (IM-ITE) Report

Select a content area to view your incorrectly answered questions	Percentage correct
• Cardiovasular Medicine (4)	30%
◆ Endocrinology and Metabolism (4)	30%
Gastroenterology and Hepatology (4)	30%
General Internal Medicine (4)	30%
Geriatric Medicine (4)	30%
• Hematology/Oncology (4)	30%
Review the educational objectives of your incorrectly answered questions and read the corresponding content. Add the relayour Learning Plan for additional study.	ated topics to

# ACP MKSAP



### The Future is Edition-less, Longitudinal, and Digital

- One unified digital learning system
- Continually updated syllabus
- Longitudinal learner data
- Single residency Tracker system
- Expanded multimedia integration

- Ongoing MCQ additions & revisions
- Growing question bank
- Highly favorable member pricing
- 2024 presale bonus content year
- Supports lifetime learners



CME/MOC Free Member Benefit

Caring for at-risk patients?

**Caring With Compassion** 

http://caringwithcompassion.org







### **Annals of Internal Medicine**<sup>®</sup>

LATEST

ISSUES

CHANNELS

CME/MOC

IN THE CLINIC

JOURNAL CLUB

WEB EXCLUSIVES

**AUTHOR INFO** 

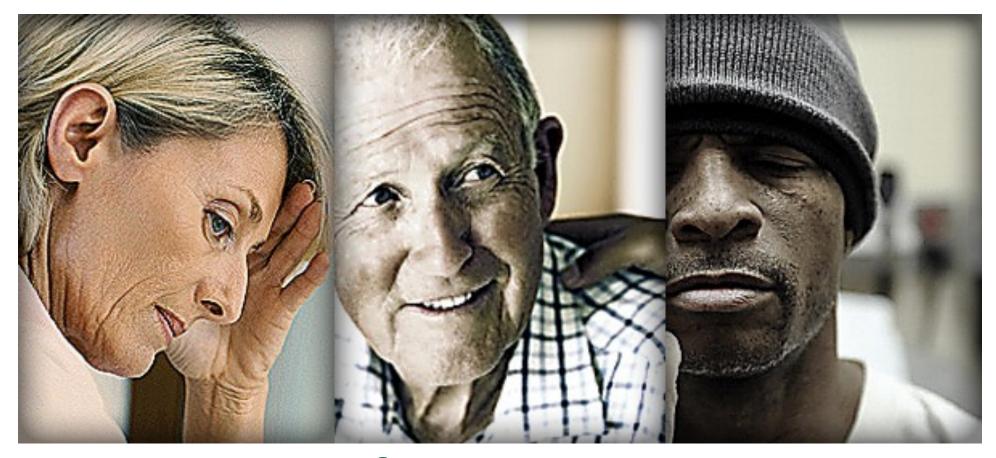
POSITION PAPERS | 17 APRIL 2018

# Addressing Social Determinants to Improve Patient Care and Promote Health Equity: An American College of Physicians Position Paper

Hilary Daniel, BS; Sue S. Bornstein, MD; Gregory C. Kane, MD; for the Health and Public Policy Committee of the American College of Physicians \*

Article, Author, and Disclosure Information

"The primary nonmedical factor affecting health is socioeconomic status."



caringwithcompassion.org



# Caring with Compassion

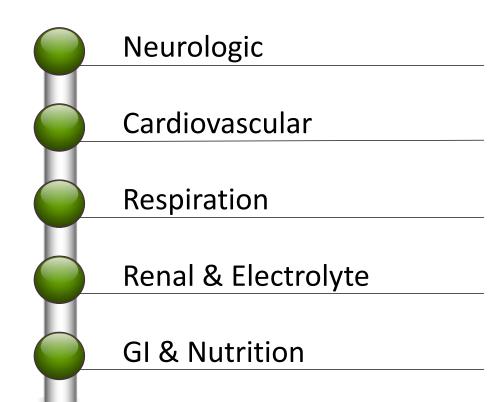


THE KNOWLEDGE AND SKILLS YOU NEED TO SERVE AT-RISK POPULATIONS

### **An Inter-Professional Team**

Davoren Chick, MD, FACP — Internal Medicine
April Bigelow, PhD, ANP-BC — Nursing
Heather Rye, LMSW — Complex Care Management
F Jacob Seagull, PhD — Research Methods
Ryan Crowley, BSJ — Public Policy
Brent C Williams, MD, MPH, FACP — Internal Medicine
Michigan Creative & ACP Digital Products and Services — Web Design
CME and continuing support — ACP staff

### **Critical Care Unit**



**Resulting Condition** 



# Ambulatory ICU & Ward ICU



**Biomedical Conditions** 



**Psychiatric Conditions** 



Social Relationships



Resources

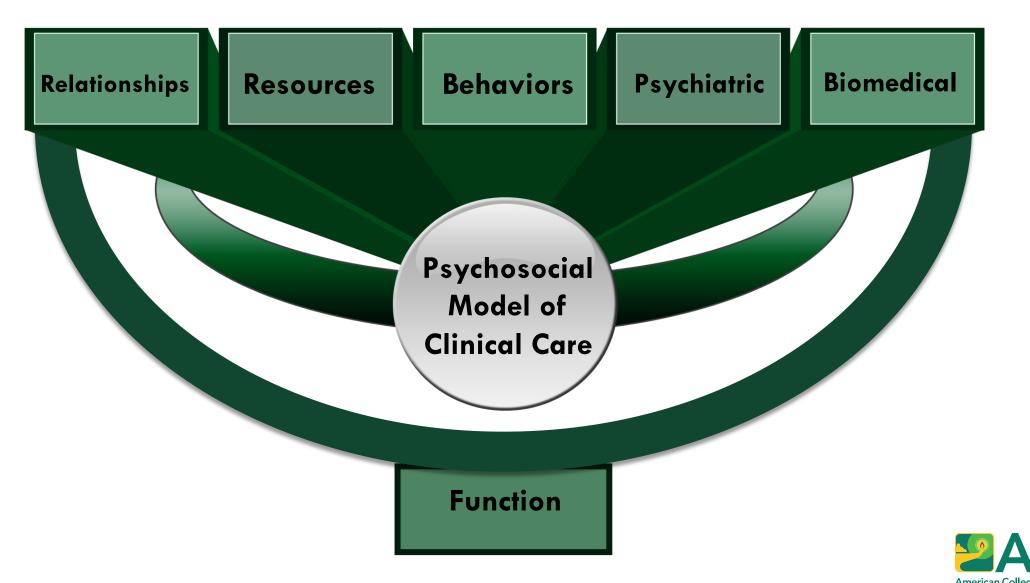


**Behaviors & Priorities** 





# **Bio-psychosocial Model**



Leading Internal Medicine, Improving Lives

### **Curricular Wrapper: Healthcare Disparities**

### Care for the Homeless and the Uninsured

Public Healthcare Systems

Bio-Psychosocial Model

Populations at risk

Public Insurance Public Healthcare Systems

Biomedical Concerns Social Determinants of Health

Psychosocial Model

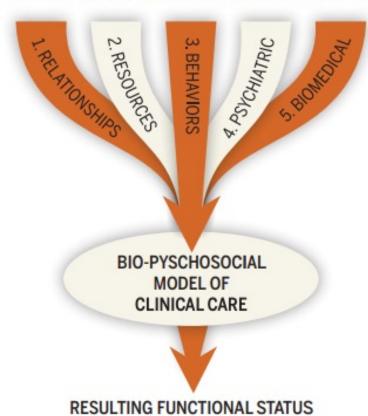
Team Care



### **Bio-Psychosocial Problem List**

- Presenting Concerns
- Biomedical Conditions
  - Chronic conditions requiring active management and minor medical findings
- Psychiatric Conditions
  - Impacting self management, function, access to care, or quality of life
- Behaviors and Substance Use Disorders
  - Stage of behavioral change, assessment of self efficacy
- Social Support Systems
  - Counseling needs, conditions requiring monitoring intervention, role models
- Community and Environmental Resources
  - Housing, community safety, food security, childcare, transportation, income, insurance, etc
- Priorities and Functional Goals
  - Relative to functional status
- Health Maintenance
  - Risk-based assessment for STI, substance-related disease, nutritional deficiencies, exposure-related conditions, and standard screening

#### **BIO-PSYCHOSOCIAL CARE DOMAINS**



# Caring with Compassion



THE KNOWLEDGE AND SKILLS YOU NEED TO SERVE AT-RISK POPULATIONS

HOME ABOUT FOR EDUCATORS RESOURCES CME CREDIT

LOG IN Email Address Password Login Forgot password?

Create your account

Login



"AT-RISK POPULATIONS" REFERS TO HOMELESS, UNEMPLOYED, UNDERSERVED, AND/OR UNINSURED INDIVIDUALS.

caringwithcompassion.org

Welcome back, Davoren Chick

### MY CURRICULUM DASHBOARD

The Caring with Compassion curriculum consists of seven learning modules and a game. The total curriculum provides working knowledge regarding public healthcare systems and the special needs of homeless, uninsured, and underserved populations. Your progress, score and completion for each module are listed in the right-hand columns. You must successfully pass each module guiz to complete the module.

LEARNING MODULE

PROGRESS SCORE COMPLETED?

leaderboards

**O**.....

#### **PUBLIC HEALTHCARE SYSTEMS**

1. Populations in Need »	89%	
2. Insurance »	90%	
3. Delivery Systems »	89%	

### **CARING FOR THE UNDERSERVED**

4. Homelessness & Disease »	100%	90%	1
5. Social Determinants of Health »	67%		
6. Biopsychosocial Health »	78%		
7. Team Care »	88%		

#### **CARE CONSEQUENCES**

Play the game » 25% 15 pts

PROGRESS & SCORE SHARING

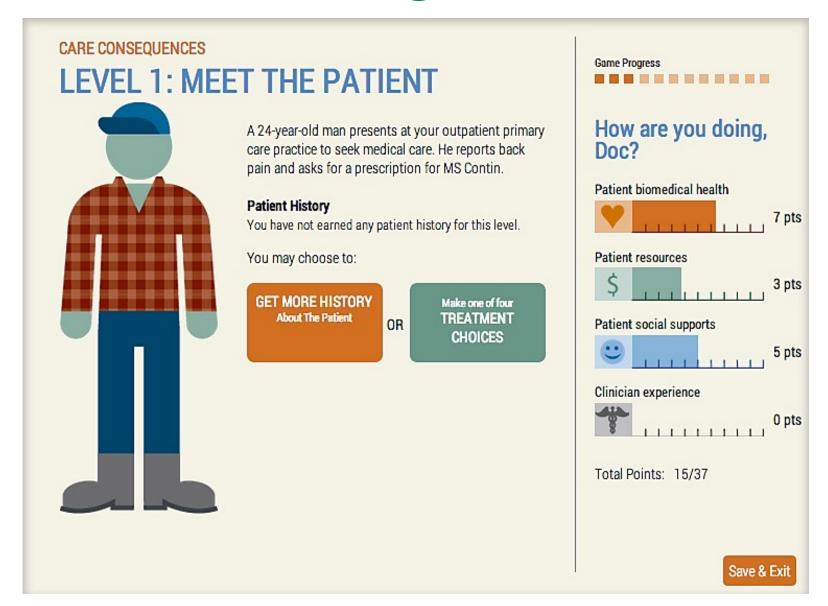
**Case-Based Didactics** 

Learning Game

Faculty Support:

Progress Sharing

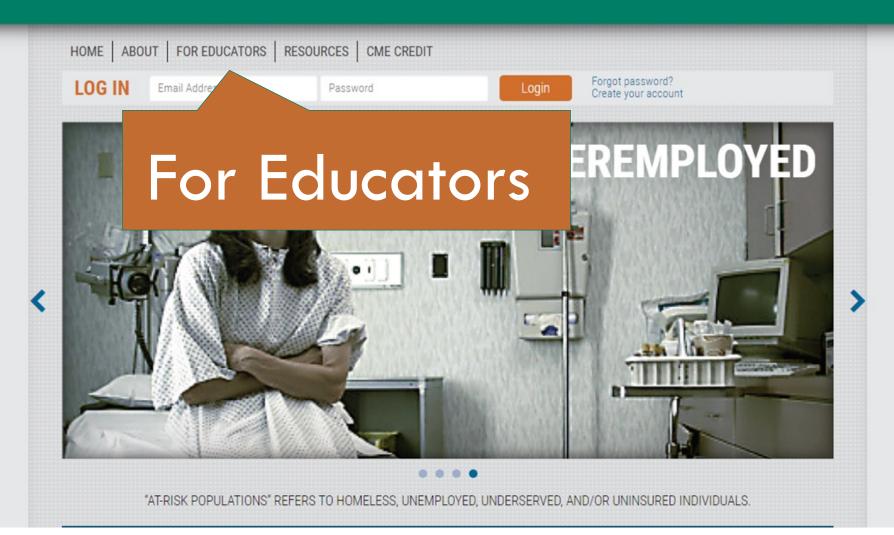
## **Learning Game**



## Caring with Compassion

THE KNOWLEDGE AND SKILLS YOU NEED TO SERVE AT-RISK POPULATIONS





## Caring with Compassion



HOME ABOUT

FOR EDUCATORS

THE KNOWLEDGE AND SKILLS YOU NEED TO SERVE AT-RISK POPULATIONS

RESOURCES | CME CREDIT

LOG OUT | PROFILE | MY DASHBOARD | ADMIN

### **OVERVIEW**

Caring with Compassion knowledge needed to pr populations: homeless, how to use team-based personalized care for at-

## Instructional Supports

1. Caring with Compass

There are 3 main compo

- user is provided with a personalized learning dashboard. The dashboard tracks progress in completing 7 educational modules. Specific content learning objectives for each module are provided. (The collected objectives can be reviewed using the menu on this page.) Each learning module provides casebased instruction and includes a post-module guiz. Final guiz scores for all modules are maintained on each user's learning dashboard. Scores may be shared with someone to verify completion.
- 2. Care Consequences the learning game. This game provides low-stakes interactive reinforcement of key learning points. Learners must make clinical

#### FOR EDUCATORS

Overview

Instructor's Guide

Milestones

Objectives

Item	% Agree / Strongly Agree	Item	% Agree / Strongly Agree
There was adequate orientation in performing BPS evaluation.	(69%)	6. The preceptor utilized the information from the BPS evaluation in the care and follow up of the patient.	(48%)
2. The BPS evaluation helped identify barriers to care and follow up.	(83%)	7. The information from the BPS evaluation improved my understanding of my patient and their needs.	(90%)
3. There were resources to help with barriers.	(83%)	8. BPS curriculum helped me to create a comprehensive problem list to identify at risk patients.	(66%)
4. The medical team used the BPS evaluation to help utilize resources in pharmacy, nursing, and social work.	N (69%)	9. I was able to develop a plan of care to address at least one barrier to care.	N (76%)
5. The BPS evaluation had added value to the history and physical.	(72%)	10. I used the caring with compassion website for resources and education in learning about at risk patients.	(31%)

### National: "I Will ..."

... better serve veteran patients

... know the different coverage provided by each type of Medicare program

... be more understanding with the homeless

understand what dually eligible is

... better understand the roles of case managers and social workers

understand better what coverage my patients have and give advice on what coverage to apply for

## National: "I Will ..." QI

... template social determinant questions into EHR

... ask disabled males about homelessness more consistently

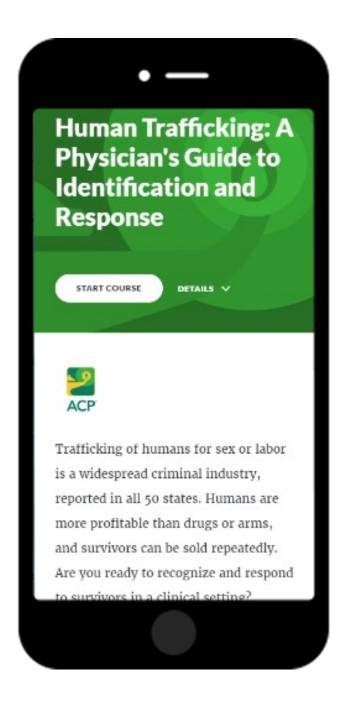
.... improve discharge planning

... change prescribing habits for homeless patients with certain conditions

### Related Educational Resources...

- Human trafficking (module)
  - Adverse childhood experiences
- Trauma-informed care (podcasts)
- Food insecurity (2 podcasts)
- Intimate partner violence (modules)
- Immigrant/migrant health (podcast)





## Frustrated by certification policies and systems?

ACP Has Your Back!

Physician Education Advocacy

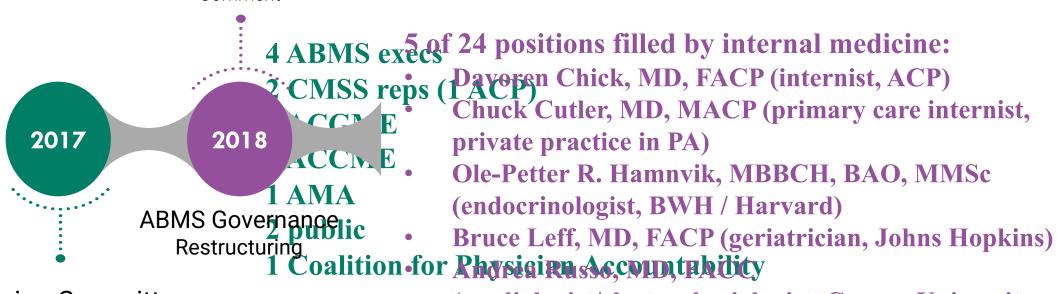




### ABMS Continuing Certification: Vision for the Future

### **Vision Commission**

Testimony, Draft Recommendations, & Public Comment



**Planning Committee** 

(cardiologist/electrophysiologist, Cooper University Health Care, NJ)

### ABMS Continuing Certification: Vision for the Future

### Vision Commission

Testimony, Draft Recommendations, & Public Comment

Standards Task Force Common Standards Draft

**ABMS Common Standards** for Continuing Certification **Implementation** 



**Oversight Committee:** 

ABMS CEO + Board Execs (FM, PMR, A&I,

**OBGYN**)

2020 2021 2022

2025

Standards Task Force

(Dr. Davoren Chick, ex officio CMSS rep)

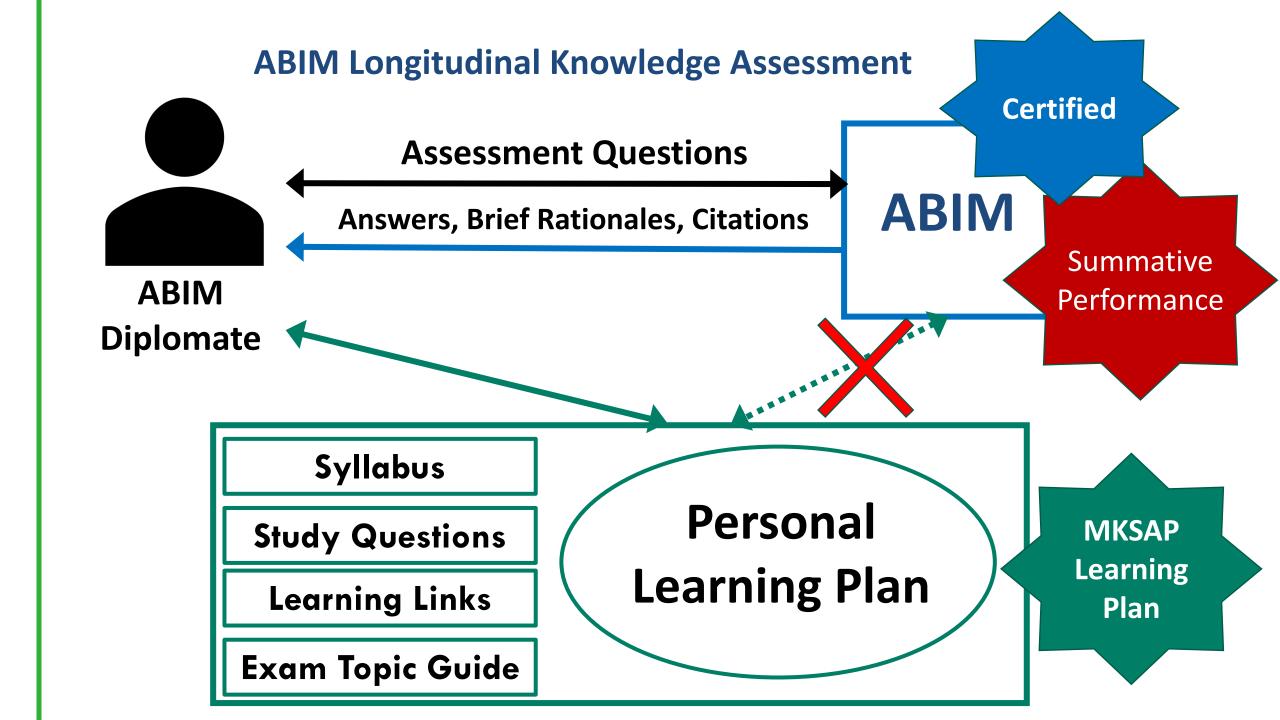
Planning Committee

Names multistakeholder Vision Commission

Vision Commission Report to ABMS BOD

Achieving the Vision Oversight Committee & Standards Task Forces formed **ABMS Draft Common Standards** for Continuing Certification

Standards **Implementation** 



## Need to Reconnect?



### **SAN DIEGO, CA**

April 27-29, 2023

Pre-courses April 25-26

## See You in San Diego!

## **Internal Medicine Meeting 2023**

New professional development center

Expanded poster sessions

Pre-courses and Clinical Skills: Sign Up Soon!



## Internal Medicine Meeting 2023



- SAN DIEGO, CA
  - April 27-29, 2023

Pre-courses April 25-26

- *New* pre-courses of note:
  - Primary Care Psychiatry
  - POCUS-Guided Procedures; Advanced POCUS for ambulatory medicine
- New Ultrasound Alley stations
  - Dialysis Access Evaluation by Physical Exam and Ultrasound
  - Ultrasound-Guided Peripheral IV Placement
- New Clinical Workshop topics include:
  - Advanced Communication Skills: How to Turn a Volatile Interaction into a Successful Patient Encounter Where You Come Out Unscathed
  - Personal Branding: Knowing and Promoting You
  - Stories that Heal and Reveal: A Radical Listening and Reflective Writing Workshop
- Added Session: "Providing Women's Healthcare in a Post-Dobbs America: What Internal Medicine Needs to Know"

# Advancing Your Personalized Learning Plan An ACP Education Update

### Davoren Chick, MD, FACP

Chief Learning Officer & SVP, Medical Education - American College of Physicians
Adjunct Professor of Medicine - University of Pennsylvania Perelman School of Medicine

Louisiana Chapter 2023 Annual Scientific Meeting March 4, 2023



