The American College of Physicians: Fostering Excellence

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DISCLOSURES

- Desai Pharmaceuticals – research funding
- Pfizer / BMS – research funding
- BMS – funding for Afib educational module
154,000 Members Strong

Leveraging the collective voice of our community to create a better place for ourselves, our profession, and our patients through medical education, practice transformation, advocacy, and engagement.

How ACP Defines Internal Medicine
Internists apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

- Established in 1915
- A diverse global community of internists united by a commitment to excellence
- Includes internists, internal medicine subspecialists, residents and fellows in training, and medical students
ACP Membership: Part of Every Stage of Your Professional Life

- Medical Student Member
- Resident/Fellow Member
- Member
- Fellow
- Physician Affiliate Member
- Non-Physician Affiliate Member
(available in the U.S. only)
ACP: A Global Community

▪ More than 15,000 ACP members reside outside the United States

▪ International chapters: Bangladesh, Brazil, Canada, Central America, Chile, Colombia, India, Japan, Mexico, Saudi Arabia, Southeast Asia, and Venezuela
ACP’s Focus At a Glance

- The science of medicine
- The clinical practice of medicine
- The education and professional development of physicians
- The ‘quadruple aim’ of health care
- The future of internal medicine
- Professional satisfaction
ACP Member Trends

ACP Member Type

- Hospitalist: 22.2%
- IM Specialist: 49.0%
- IM Subspecialist: 28.8%

Satisfaction with Career in IM

- Very Satisfied: 42.5%
- Somewhat Satisfied: 44.1%
- Neither Satisfied Nor Dissatisfied: 4.0%
- Somewhat Dissatisfied: 7.1%
- Very Dissatisfied: 2.2%

Source: 2018 ACP Member Survey
ACP Member Trends

Typical Hours Worked per Week

- More than 80 hours: 7.7%
- 71-80 hours: 9.7%
- 61-70 hours: 15.3%
- 51-60 hours: 29.3%
- 41-50 hours: 27.1%
- 40 hours or less: 10.9%

Source: 2018 ACP Member Survey
Working *for you and with you:* Changing the Landscape of Health Care for the Better
ACP’s Physician Well-being and Professional Satisfaction Initiative

Fostering Local Communities of Well-being
Trained ACP Well-being Champions supporting their ACP chapter members, practices, and organizations in combating burnout.

Advocating for Systems Changes
Policy recommendations through ACP’s Patients Before Paperwork initiative that call for simplifying, streamlining, and reducing excessive administrative tasks that detract from patient care and contribute to physician burnout.

Improving the Practice and Organizational Environment
Providing ACP members with high quality information, resources, tools, and support to help their practices thrive in the growing value-based payment environment.

Promoting Individual Well-being
Offering online resources and educational courses at ACP’s Internal Medicine Meeting and chapter meetings to help ACP members manage issues related to well-being and satisfaction.

acponline.org/physician-well-being
Women in Medicine

Promoting gender equity, eliminating the inequities in compensation and career advancement that physicians face is a longstanding goal of ACP.

acponline.org/advocacy/where-we-stand/women-in-medicine
Reducing Unnecessary Burdens

Unnecessary burdens lead to limited time with patients, too much paperwork, and work/life imbalance.

ACP addresses these issues by:

- Seeking improvement to systems and documentation requirements
- Identifying and prioritizing burdensome administrative tasks
- Assessing tasks for impact on outcomes
- Developing policy recommendations to enact change
- Engaging in ongoing outreach and stakeholder engagement
Patients Before Paperwork

What is Patients before Paperwork?
ACP’s Patients Before Paperwork initiative’s goal is to reinvigorate the patient-physician relationship by reducing administrative complexities and eliminating unessential tasks that detract from patient care and contribute to physician burnout.

Policy Development
ACP policies provide a cohesive framework for identifying and evaluating administrative tasks, and offer detailed recommendations to analyze administrative tasks to determine whether they need to be challenged, revised, or eliminated entirely.

Tools You Can Use
Resources and tools help physicians put ACP’s policies into practice. They include resources that assess practice efficiencies and resources on physician well-being and professional satisfaction.

Collaborating with Stakeholders
ACP engages with key regulatory agencies and stakeholders to help streamline regulations imposed by insurers, federal regulators and other external entities to reduce administrative burdens for physicians.

Advocating for Internists
ACP has long identified reducing administrative complexities or burdens as a priority. ACP works to advocate for changes in our health care system that simplify excessive administrative burdens that put a strain on physicians and patient care.

acponline.org/patientsbeforepaperwork
High Value Care

- Initiatives aim to improve health, avoid harms, and eliminate wasteful practices

- Updated HVC Curriculum for Educators and Residents, jointly developed with the Alliance for Academic Internal Medicine
  - Train physicians to be good stewards of limited health care resources
  - New cases, small group activities, and expanded discussions of medical decision-making and high-value quality improvement
Supporting Patient and Family Partnerships

- ACP’s Center for Patient Partnership in Healthcare provides programs and resources that support patient and family partnerships to improve care and outcomes
- *ACP Principles for Patient and Family Partnerships* (Annals, November 2018)
Working *for you* and *with you*: Excellence in Educational Resources
Annals of Internal Medicine: One of the world’s most widely cited medical journals

Current, evidence-based science at your fingertips.

- “Online first” articles
- Annals on Call - Bob Centor’s podcast
- The Annals Fresh Look blog: freshlook.annals.org
- Annals Story Slam events and videos
- Annals content and physician pledge on firearm safety: go.annals.org/commit-now
MKSAP ® 18: The go-to resource for board prep and lifelong learning

- **MKSAP 18** is completely new-from the ground-up; offers 275 CME credits
- **NEW**: Residency Tracker, a monitoring tool for Program Directors to assess the progress and proficiency of residents as they answer MKSAP 18 Digital questions
- **NEW**: refreshed with adaptive learning technology
- **NEW**: platform, dashboard, and search engine functionality
- Available in print, digital, and complete formats

[acponline.org/MKSAP18](acponline.org/MKSAP18)
ACP Publications: Online and In Print

ACP Publications Websites:
- ACPInternist.org
- ACPHospitalist.org

Monthly Print Publications:
ACP Internist and ACP Hospitalist provide news and in-depth analysis of issues for inpatient and outpatient internists

E-newsletters:
ACP Internist Weekly, ACP Hospitalist Weekly, ACP Advocate, ACP Diabetes Monthly, ACP Gastroenterology Monthly
DynaMed Plus™

Clinical content that is current, concise, and easy to search:

- Free access for members (through August 2019)
- Includes overviews and recommendations for more than 750 topics, 2,500 searchable images, and numerous calculators
- Mobile apps available for Android and iOS

ACPOnline.org/DynaMedPlus
ACP JournalWise: Exclusive Member Benefit

ACP JournalWise searches filters >120 top journals

- Free access for ACP members
- Personalize your alerts by selecting specialties and clinical topics you want to know about
- Choose the rating threshold and how often you want your alerts

[link: journalwise.acponline.org]
Online Learning Center

A new centralized gateway for online learning activities

- More than 350 activities including:
  - Video-based learning
  - Webinars
  - Interactive cases
  - Quizzes

- CME and MOC eligible

acponline.org/olc
Opioids Interactive Learning Module

- First in a series of interactive learning modules
- Free to ACP members
- CME and MOC eligible
Podcasts by Internists, for Internists

Focusing on internal medicine-related topics, podcasts offer CME and MOC.

acponline.org/podcasts
Cases to Improve Diagnosis

Cases designed to encourage diagnostic decision-making:

- Understanding the Diagnostic Process
- Partnering with Patients and Families in the Diagnostic Decision-Making Process
- Physician and Patient Factors in Diagnostic Decision-Making
- Recognizing and Responding to Diagnostic Errors

acponline.org/olc
Resources for Educators

- Teaching Medicine Series
  (Theory and Practice of Teaching Medicine, Teaching Methods, Teaching in the Hospital, Teaching in the Clinic, Teaching Clinical Reasoning, Mentoring in Academic Medicine, and Leadership in Medical Education)
- Annals of Internal Medicine teaching tools
- Internal Medicine In-Service Training Examination for residents
- ACP Board Prep Curriculum for residents
- High Value Care Curriculum for trainees at all levels
- IM Essentials for medical students
Working *for you* and *with you*: Addressing Issues of Importance
ACP Submits Comments Fee Schedule/QPP

- November 2018 - CMS final rule 2019 Physician Payments and QPP
- CMS was responsive to many of the concerns raised during the comment period
- ACP continues to advocate to improve the Medicare payment system

**Physician Fee Schedule Updates**

- **Reduced documentation requirements for physicians starting in 2019** – CMS is eliminating redundancies and only requiring physicians to document changed information since the last visit for established patients.
- While CMS is moving forward with evaluation and management (E/M) coding payment reforms, they have delayed implementation until 2021.
- CMS modified its proposal of a flat rate for office/outpatient E&M level 2 through 5 visits and will continue to pay a higher rate for the most complex patient care, or level 5 visits.
- ACP has concerns and will continue to advocate for paying level 4 visits, the second most complex visits, at a higher rate – and will work with CMS on alternate approaches that recognize the value of complex, cognitive care.
- **Add-on codes for level 2-4 visits in primary care and certain specialties will be allowed**, as well as extended visits – to account for the value of cognitive work in treating more complex patients. This change equalizes primary care payments to specialty payments. (Effective 2021)
- ACP is pleased that CMS finalized the new prolonged services codes but would like them implemented in 2019.
- **New payment codes in 2019 for non-face-to-face visits** – including virtual check-ins, e-consultations, and remote evaluation of patient images and videos.
- CMS has cancelled the Multiple Procedure Payment Reduction (MPPR) proposal.

**Quality Payment Program Updates**

- A Merit-based Incentive Payment System (MIPS) opt-in option will be added by CMS for practices previously excluded under the low-volume threshold, expanding participation without increasing burden.
- CMS continues to identify and remove low-priority, low-value quality measures – they will work with stakeholders to focus on measures that offer the most promise for improving patient care while minimizing reporting burdens.
- Implementation of 2015 Certified Electronic Health Record Technology (CEHRT) for the 2019 reporting period will be required. While ACP agrees that using updated standards can help improve interoperability, ACP believes rushing implementation of these upgrades to meet a reporting deadline can have serious patient safety risks and is a major expense and burden.
- CMS will continue the consistent risk threshold for Alternative Payment Models (APMs) — this will provide consistency and predictability for APM model developers and will help APMs continue to grow.
- CMS finalized changes to the Cost Category — including adding several new episode-based measures, despite concerns over low reliability ratings, while simultaneously increasing the weight of the Cost Category from 10 to 15 percent, despite objections from ACP and other stakeholders.
Responding to ACP Member Feedback

Responsive to feedback from members - advocated against changes to codes that devalue complex visits

Messaging around the final rule to reflect 3 points that were emphasized in the College’s comment letter:

1. ACP strongly believed that the proposal to pay a single flat fee for E/M levels 2-5 should not be implemented because it undervalued cognitive care for the more complex patients

2. ACP appreciated and supported CMS’s proposals to reduce the burden of documentation for E/M services, yet opposed CMS’s proposal to pay a single flat fee for E/M services

3. ACP urged CMS not to establish a regulatory deadline for finalizing and implementing its flat E/M fee proposals, and instead, to take the time to “get it right”
Communications Surrounding the Fee Schedule/QPP Final Rules

ACP Encouraged by Changes in Medicare Payment Policies in 2019

On November 1, 2018, the Centers for Medicare & Medicaid Services (CMS) released the final rules on 2019 Physician Payments and the Quality Payment Program (QPP).

CMS Responsive to ACP Recommendations

ACP is encouraged that CMS was responsive to many of the concerns ACP raised during the comment period. Highlights include:

Internists Note that Final CMS Payment Rule Improves on Proposed Changes to E/M Codes

ACP will continue to work with CMS on further improvements

Washington, DC (November 2, 2018) — The American College of Physicians (ACP) appreciates that the final Medicare Physician Fee Schedule and the Quality Payment Program (QPP) rules for 2019 are responsive to many of the concerns that ACP raised with the Centers for Medicare and Medicaid Services (CMS).
Evidence-Based Clinical Guidance

ACP continues to be a leader in developing evidence-based resources that help our members and the entire internal medicine community deliver the best possible care for patients.

Recent topics addressed include:

- Hepatitis B screening vaccination and care
- Guidance on glycemic control for patients with Type 2 diabetes
Ethical Guidance

- Optimizing clinical learning around ethics and professionalism
- **Ethics Manual update - January 2019**
- Providing guidance on important ethical issues
  - Physician-assisted suicide
  - Obligations regarding short-term global health experiences
  - Hidden curricula in medical school
- Creating helpful case studies
  - Addressing a Colleague’s Unprofessional Behavior During Sign-Out
  - Secret Recordings of Office Visits by Patients
Recent papers from the Performance Measurement Committee include:

- An analysis of items applicable to internal medicine within the 2019 CMS Merit-based Incentive Payment System.

- Collaboration on “Time Out — Charting a Path for Improving Performance Measurement” where ACP advocated for an improved measure development process.
ACP Public Policy Development Process
ACP’s “Big Tent” Advocacy Agenda

**COLUMN A**
- ✓ Expand access and coverage
- ✓ Improve public health
- ✓ Support research and science
- ✓ Oppose discrimination
- ✓ Reduce health care disparities
- ✓ Support primary care workforce
- ✓ Lower Rx drug prices

Affect the overall health and well-being of patients and the public.

**COLUMN B**
- ✓ Improve EHRs
- ✓ Reform and improve payments
- ✓ Improve Medicare’s Quality Payment Program
- ✓ Improve quality measures
- ✓ Reform medical liability system
- ✓ Reduce crushing administrative burden

Affect the health, well-being, professional, and career satisfaction of our members.
ACP Public Policy and Advocacy

- ACP advocates for changes that will make a difference in the daily lives of internists and patients’ health
  - Expanding access to affordable, high-quality care
  - Prohibiting discrimination that results in health care disparities
  - Reducing prescription drug costs
  - Opioid crisis
Collaboration with Physician Organizations

ACP collaborates with other physician organizations representing more than 560,000 physicians and medical students:

- American Academy of Family Physicians
- American Academy of Pediatrics
- American College of Obstetricians and Gynecologists
- American Osteopathic Association
- American Psychiatric Association
Providing Input on Regulatory Issues

Represents internist views to regulatory agencies, including CMS and the Office of the National Coordinator for Health Information Technology

- Suggest changes to regulations and policies to reduce excessive administrative tasks/Quality Payment Program
- Help ACP members and internists in the shift in focus from volume to value
- Recent activity includes participation on a Congressional Red Tape Round Table and a meeting with CMS Administrator Seema Verna
Advocacy and Regulatory Wins

- CMS allows incorporation of medical student notes
- Called for a reduction in Medicare paperwork at House subcommittee roundtables
- Two-year delay of changes to payments for E/M services
- Continued higher payment for level 5 patient visits
- Virtual check-ins approved for reimbursement
Advocacy and Regulatory Wins

- Fix delay in medical student visas
- Ensured funding for essential health programs: NIH, CDC and other priorities
- Reaffirms leadership role at White House summit on Opioids
- Increased access to Medication Assisted Treatment
Public Policy Papers: Addressing Timely Issues

- Reducing Firearm Injuries and Deaths
- Social Determinants of Health
- Women’s Health Policy
- Patient Safety in the Office-Based Practice Setting
- Promoting Transparency and Alignment in Medicare Advantage
- Improving Health Care Efficacy and Efficiency Through Increased Transparency
- Gender Equity in Compensation and Career Advancement
ACP Firearms Policy Sparks Movement
#ThisIsOurLane

In response to the most recent ACP policy recommendations on reducing firearm-related injuries and deaths published in *Annals*, the NRA tweeted saying physicians should “stay in their lane.” ACP and physicians were quick to respond...
First patient, first wound to the mother cried in our arms to save his live the last one elbow #ThisISOurLane

Can’t post a patient picture here. This is what it looks like.

@NRA @Joseph

Now, why in the hell do you think you have something against guns? It’s sort of like the trouble you have with life? #ThisISOurLane #GunControl

Here’s hoping that the .@NRA and .@AnnCoulter realize that this is the reality we face. We seek solutions, and we won’t quit because lives depend on it. Help us with #bulletholecontrol. Join us. #ThisISOurLane #TraumaShoes #TraumaSurgery @EAST_TRAUMA @traumadoctors @DocsDemand
Firearms Case Study: national attention

David Hogg
@davidhogg111

Thank you to all the doctors standing up to the gun lobby the same way they did with the cigarette lobby.

6:36 AM - 13 Nov 2018

7,454 Retweets 47,361 Likes

Vox
@voxdotcom

After NRA Mocks Doctors, Physicians Reply: 'This Is Our Lane'

"Being silenced is not acceptable": Doctors express concern
Medical professionals take to Twitter to share their stories of victims.

Washington Post

9:53 AM - 12 Nov 2018

16 Retweets 26 Likes

NPR
@NPR

After NRA Mocks Doctors, Physicians Reply: 'This Is Our Lane'

"We are not anti-gun; we are anti-bullet holes in our patients," wrote one physician in response to the NRA. Another posted a photo of his own scrubs, bloody from trying to

NPR

3:42 PM - 11 Nov 2018

1,525 Retweets 4,362 Likes
Working *for you* and *with you*: Practice Resources
Helping You Transform Your Practice

- **ACP Practice Transformation Resources:**
  Information, resources, tools to successfully care for patients in the value-based payment environment

- **Quality Payment Advisor:**
  Online tool to assist in determining the best path to take—MIPS or APM.

- **ACP Practice Advisor:**
  Online tool to help analyze and improve patient care, organization, and workflow
ACP Advance


- Help organizations engage their physicians and clinical staff to achieve success in Quality Improvement and High Value Care initiatives
  - Identify strengths and gaps
  - Live QI training
  - Peer-to-peer guidance and coaching
  - Implementation support
Working for you and with you: Collaborating with Others for Positive Change
The Future of MOC

- The Vision Commission released draft report Dec 2018.  
  visioninitiative.org/commission/draft-report
- Feedback collected during the public comment period. Final report will be submitted to the ABMS Feb 2019!
- ACP advocates for programs that meet the needs of ACP members and our patients
  - Supports lifelong learning
  - Relevant to practice
  - Does not rely on high-stakes exam
  - Not burdensome or excessive cost
Working *for you and with you*: Involvement, Engagement, and Opportunities to Connect
Internal Medicine Meeting 2019: ACP’s Annual Scientific Meeting

Internal Medicine Meeting 2019
April 11-13, 2019
Philadelphia, PA
Register online at
annualmeeting.acponline.org

Marking ACP's 100th annual meeting and its excellence in clinical education.
Keynote speaker,
Vivek H. Murthy, MD, former Surgeon General of the United States
Engagement Opportunities with ACP Chapters

86 Chapters and Regions across the United States and the world:

• Help influence state legislation
• Network with peers
• Mentor medical students, residents, and early career Committee
• Influence ACP policy
• Volunteerism: Be on the lookout for an upcoming email encouraging you to volunteer
Become an ACP Fellow

ACP Fellowship: Fellowship in the College is an honor. FACP® is a distinction earned from colleagues who recognize your accomplishments and achievements in the practice of internal medicine.

Election to Fellowship recognizes excellence in the practice of internal medicine and is achieved through professional accomplishments within one, or across multiple pathways.

For information and criteria:  
[ACPOnline.org/FACP]
Join Advocates for Internal Medicine Network (AIMn)

- Grassroots advocacy network designed to help ACP members engage with federal lawmakers on policy issues important to internists

- AIMn members receive legislative updates and alerts as key policy issues unfold, including sample messages to members of Congress

- Enroll at cqrcengage.com/acplac
Support the Next Generation of IM

- Promote the rewards of internal medicine as a career
- Recommend General IM to residents
- Invite internists to join ACP
- Sponsor a Member for Fellowship (FACP)
Recruit-a-Colleague

- Recruit one colleague (U.S. only) and receive a $100 credit toward your 2019-20 annual dues
- Recruit two colleagues and receive a $200 credit toward your 2019-20 annual dues
- Recruit three colleagues and receive a $300 credit toward your 2019-20 annual dues
- Recruit four colleagues and enjoy free annual dues in 2019-20

Sign up at [ACPOnline.org/RAC](https://ACPOnline.org/RAC)
Get Connected!

For ways to connect, and personalize your engagement with, visit acponline.org

- **MyACP**
  A personalized web experience, making it easier for members to access and discover pertinent ACP content and resources while visiting ACPOnline.org.

- **ACP Member Forums**
  ACP Member Forums allow ACP members to instantly participate in discussions on a range of clinical, professional, and practice-related topics.
Follow ACP on Social Media

twitter.com/acpinternists
twitter.com/AnnalsofIM
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facebook.com/annalsofim
instagram.com/acpinternists
linkedin.com/groups/867307
youtube.com/imreport
Thank you . . .

...for your continued support of ACP and your commitment to internal medicine.