Fostering Excellence & Professionalism in Internal Medicine

American College of Physicians
Louisiana Chapter Meeting

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ACP’s Mission & Goals

**Mission:** To enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.

**Goals:**

- To establish and promote the highest clinical standards and ethical ideals
- To be the foremost comprehensive education and information resource for all internists
- To advocate responsible positions on individual health and public policy relating to health care for the benefit of the public, our patients, the medical profession and our members
- To serve the professional needs of the membership, support healthy lives for physicians and advance internal medicine as a career
- To promote and conduct research to enhance the quality of practice, the continuing education of internists and the attractiveness of internal medicine to physicians and the public
- To recognize excellence and distinguished contributions to internal medicine
- To unify the many voices of internal medicine and its subspecialties for the benefit of our patients, our members and our profession
2016-2017 Priority Initiatives

- Continue to advocate for timely reforms to ABIM’s MOC process
- Facilitate the transition to value based payment and new delivery models
- Increase ACP’s role and critical input as a national leader in optimizing performance measurement
- Expand ACP’s work in reducing the cost of healthcare
- Increase the number and engagement of ACP members
- Help ACP members experience greater professional satisfaction and fulfillment
- Expand approaches to delivering information and education
ACP’s focus at a glance

- The science of medicine
  - *Annals of Internal Medicine*

- The clinical practice of medicine
  - Clinical standards, guidelines

- The education and professional development of physicians
  - MKSAP, meetings and courses

- The ‘quadruple aim’ of healthcare
  - Better care, better health, physician professional satisfaction, lower per capita costs

- The future of medicine
  - Students, residents, fellows

- Professional satisfaction
  - Payment reform, practice redesign
Why join ACP?

- **Evidence-based Clinical Information and Educational Resources**

- **Board Certification and Maintenance of Certification (MOC) resources**
  MKSAP, review courses, resources and opportunities for MOC points

- **Continuing Medical Education (CME)**
  Earn CME by attending live meetings, working online or watching course recordings on your own schedule

- **Influential Advocacy**

- **Practice Support**
  Tools and resources for Quality Improvement and Practice Transformation

- **Professional Development**
Who we are

Data from ACP’s 2016 Member Survey has revealed some major trends that paint a portrait of an evolving physician workforce:

- Half of post-training physicians are internal medicine specialists (GIMs), two in ten are hospitalists, and three in ten are subspecialists. Survey respondents under age 40 are more commonly hospitalists and less commonly GIMs or subspecialists.

- One in three works in a small practice with five or fewer physicians, one in four in a medium setting with 6 to 20 physicians and four in ten in a large setting with more than 20 physicians.

- Most physician-owned practices (58%) have five or fewer physicians, while those owned by health care systems (56%) or the government (57%) have more than 20 physicians.

- Six in ten report respondents that they or their practice use digital technology such as email or text to communicate with patients and/or their families, with seven in ten (74%) primary care physicians and eight in ten (81%) physicians in academic medical centers reporting use for this purpose.

*Source: 2016 Member Survey Detailed Report (random sample of 2,000 U.S., non-student, ACP members ages 65 and younger between March and June 2016)
Annals of Internal Medicine

One of the most widely cited medical journals in the world; current, evidence-based science at your fingertips. Recent Annals features include:

- Redesigned annals.org—Annals’ new interface features a responsive design that automatically optimizes for all devices, including desktop, tablet, or smartphone
- “Online first” articles—new content weekly
- Annals for Hospitalists—including monthly alerts highlighting Annals’ hospital medicine content, a new Hospital Medicine channel at annals.org, and “Inpatient Notes,” monthly web-only commentary on hospital medicine topics
MKSAP® 17

The gold-standard of physician self-assessment for 50 years; discounted for ACP members

- Use for board preparation, recertification (MOC) preparation and credit, and updating medical knowledge
- Covers general internal medicine and 11 internal medicine subspecialties
- 1,200 multiple-choice questions; answers and critiques included
- Available in both print and digital formats
IM Essentials™

Updated, integrated suite of materials for students
- Developed by ACP and the Clerkship Directors in Internal Medicine
- Helps third-year medical students care for patients, prepare for clinical rounds, study for the end-of-rotation and USMLE Step 2 exams
- IM Essentials Text (Print)
- IM Essentials Questions (Print)
- IM Essentials Online
  (integrated digital version of both IM Essentials and IM Essentials Text)
Internal Medicine In-Training Examination (IM-ITE)

Web-based program designed for self-assessment and program evaluation

- Developed by ACP in collaboration with Alliance for Academic Internal Medicine
- Gives residents an opportunity for self-assessment
- Allows program directors the chance to evaluate their programs
- Identifies individual resident knowledge gaps to guide learning
Evidence-Based Clinical Guidance

ACP’s Clinical Practice Guidelines, Guidance Statements, Best Practice Advice and High Value Care papers are rigorously developed based on review of the best evidence available. Recent Clinical Policies and Recommendations:

- Noninvasive Treatments for Acute, Subacute, and Chronic Low Back Pain (February 2017)
- Pharmacological Treatment of Hypertension in Adults Over Age 60 to Higher vs. Lower Targets (January 2017)
- Oral Pharmacologic Treatment of Type 2 Diabetes (January 2017)
- Diagnosis of Acute Gout (November 2016)
- Management of Chronic Insomnia Disorder in Adults (May 2016)
- Nonpharmacological Versus Pharmacological Treatment of Adult Patients with Major Depressive Disorder (February 2016)
Encouraging High Value Care

Resources to help provide the best patient care while reducing health care costs:

- **New High Value Care (HVC) Online Cases:** Earn free CME credits and MOC patient safety and medical knowledge points through web-based cases and questions
- **Curriculum For Educators, Residents and Students:** Created by ACP and the Alliance for Academic Internal Medicine (AAIM), features six one-hour interactive modules
- **HVC Course For Medical Students:** Students evaluate the benefits, harms and costs of tests and treatment options so they can make HVC a reality in clinical practice
Encouraging High Value Care (cont’d)

Resources to help physicians provide the best patient care while reducing health care costs:

- High Value Care Coordination (HVCC) Toolkit: Resources to facilitate more effective and patient-centered communication between primary care and subspecialist doctors.
- Pediatric to Adult Care Transitions Toolkit: Resources to facilitate more effective transition and transfer of young adults from pediatric to adult care.
- Collaboration with Consumer Reports: A series of new High Value Care Resources to help patients understand the importance of seeking appropriate care.
Preparing for a new Payment System: MACRA/QPP

- Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) – focused on Part B Medicare
- MACRA has been recast as the Quality Payment Program
- Congressional Intent of MACRA:
  • Sustainable Growth Rate repeal
  • Improve care for Medicare beneficiaries
  • Consolidates and simplifies Meaningful Use, Value-based Modifier and PQRS
  • Change our physician payment system from one focused on volume to one focused on value
Quality Payment Program (QPP) In a Nutshell

Law intended to align physician payment with value

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)
Now known as...

Quality Payment Program

- Merit-Based Incentive Payment System (MIPS)
- Advanced Alternative Payment Models (APMs)
Timing of QPP Implementation

Performance:
The first performance period opens January 1, 2017 and closes December 31, 2017. During 2017, record quality data and how you used technology to support your practice. If an Advanced APM fits your practice, then you can provide care during the year through that model.

Send in performance data:
To potentially earn a positive payment adjustment under MIPS, send in data about the care you provided and how your practice used technology in 2017 to MIPS by the deadline, March 31, 2018. In order to earn the 5% incentive payment for participating in an Advanced APM, just send quality data through your Advanced APM.

Feedback:
Medicare gives you feedback about your performance after you submit your data.

Payment:
You may earn a positive MIPS payment adjustment beginning January 1, 2019 if you submit 2017 data by March 31, 2018. If you participate in an Advanced APM in 2017, then you may earn a 5% incentive payment in 2019.

Source: https://qpp.cms.gov/
Pick Your Pace – MACRA/QPP Final Rule for 2017 Reporting

- **Don’t Participate**: Not participating in the Quality Payment Program: If you don’t send in any 2017 data, then you receive a negative 4% payment adjustment.

- **Submit Something**: Test: If you submit a minimum amount of 2017 data to Medicare (for example, one quality measure or one improvement activity for any point in 2017), you can avoid a downward payment adjustment.

- **Submit a Partial Year**: Partial: If you submit 90 days of 2017 data to Medicare, you may earn a neutral or small positive payment adjustment.

- **Submit a Full Year**: Full: If you submit a full year of 2017 data to Medicare, you may earn a moderate positive payment adjustment.

- **Participate in the Advanced APM path**: If you receive 25% of Medicare payments or see 20% of your Medicare patients through an Advanced APM in 2017, then you earn a 5% incentive payment in 2019.

Source: https://qpp.cms.gov/
This new MIPS “report card” will replace current Medicare reporting programs

There are currently multiple individual quality and value programs for Medicare physicians and practitioners:

- Physician Quality Reporting Program (PQRS)
- Value-Based Payment Modifier (quality and cost of care)
- Advancing Care Information

MACRA/QPP streamlines those programs into MIPS:

- Merit-Based Incentive Payment System (MIPS)

How Will Clinicians Be Scored Under MIPS?

A single MIPS composite performance score will factor in performance in 4 weighted performance categories:

Year 1 or 2019*

Quality 60%  Advancing Care Information 25%  Clinical practice improvement activities 15%  Cost 0%

*MIPS Composite Performance Score

* Based on reporting data in 2017
Advanced Alternative Payment Models (APMs)

Initial definitions from MACRA law, APMs include:

- **CMS Innovation Center model** (under section 1115A, other than a Health Care Innovation Award)
- **MSSP** (Medicare Shared Savings Program)
- **Demonstration** under the Health Care Quality Demonstration Program
- **Demonstration** required by Federal Law

As defined by MACRA/QPP, advanced APMs must meet the following criteria:

- The APM requires participants to use certified EHR technology.
- The APM bases payment on quality measures comparable to those in the MIPS quality performance category.
- The APM either: (1) requires APM Entities to bear more than nominal financial risk for monetary losses; OR (2) is a Medical Home Model expanded under CMMI authority.
Medical Home Models:

✓ Have a **unique financial risk criterion** for becoming an Advanced APM (2.5% of A & B revenues).

✓ Enable participants (who are not excluded from MIPS) to receive the **maximum score in the MIPS CPIA category**.

A **Medical Home Model** is an APM that has the following features:

✓ Participants include **primary care practices** or multispecialty practices that include primary care physicians and practitioners and offer primary care services.

✓ **Empanelment of each patient** to a primary clinician; and

✓ **At least four** of the following:

  • Planned coordination of chronic and preventive care.
  • Patient access and continuity of care.
  • Risk-stratified care management.
  • Coordination of care across the medical neighborhood.
  • Patient and caregiver engagement.
  • Shared decision-making.
  • Payment arrangements in addition to, or substituting for, fee-for-service payments.

Resources to Help You Transform Your Practice: Prepare for New Payment System

ACP is helping you transform your practice, choose the right path, keep up-to-date and meet deadlines through tools and resources: (https://www.acponline.org/macra)

- **MACRA/QPP Information**: Online FAQs, fact sheets, webinars (live and recorded), articles in ACP publications
- **Practice Transformation**: Information, resources, tools and support to help practices make strategic changes to successfully care for patients in the value-based payment environment
- **Physician & Practice Timeline**: Online tool that helps track deadlines for a variety of regulatory, payment, educational and delivery system changes and requirements. Members can sign up by texting ACPtimeline (no space) to 313131 from mobile phones
- **ACP Practice Advisor**: Online tool to help practices analyze and improve patient care, organization and workflow
Helping You Transform Your Practice: Quality Improvement Resources

- **ACP Quality Connect Immunization Resources**: An initiative to help physicians promote and implement adult immunizations.

- **ACP Practice Assessment Tools**: Free, web-based products that physicians can use to earn both CME credit and ABIM MOC Practice Assessment points.

- **Diabetes Registry**: Clinical registry aimed at tracking and improving the quality of diabetes and cardiometabolic care across the primary and specialty care continuum.
Helping You Transform Your Practice: Prepare for Value-Based Payment

- **ACP Genesis Registry**: A quality reporting service to help physicians meet Meaningful Use requirements and improve patient care.
- **PQRS Wizard**: ACP offers the PQRS wizard, a fast, convenient, and cost-effective online tool to collect and report quality data for the CMS PQRS program.
- **AmericanEHR Partners**: A free online resource designed to aid the medical community with the selection, implementation, and effective use of health information technology and electronic health records. For more information on AmericanEHR Partners, visit www.americanehr.com.
Helping You Transform Your Practice: Prepare for Value-Based Payment

- ACP participating in grant-funded Transforming Clinical Practice Initiative (TCPi) from Centers for Medicare & Medicaid Services (CMS).

- Goal: Help equip clinicians with tools, support to achieve better health, better care and lower costs. The initiative supports the creation of regional, national learning communities to share and widely disseminate best practices.

- ACP is one of 10 national Support and Alignment Networks; helping clinicians and practices transform from volume-based to value-based, patient-centered care by offering:
  - Free Access to ACP Practice Advisor® - new modules being developed that specifically help with practice transformation
  - Referrals to Practice Transformation Networks - peer-based learning networks designed to coach, mentor and assist clinicians in developing core competencies specific to practice transformation
  - Free CME/MOC Through High Value Care Cases

http://innovation.cms.gov/initiatives/Transforming-Clinical-Practices/
ACP has developed a comprehensive approach to address the top administrative complexities members face.

Through policy development and collaborations with other groups, feedback to regulatory agencies, and education, ACP seeks to reduce physician burn-out and help restore the joy of practice.

A 2014 ACP focus group showed the top 3 frustrations as:
- Electronic Health Record Usability
- Quality Reporting
- Dealing with Insurance Companies

ACP has tools available to help you now on the Practice Resources section of the website such as ACP Practice Advisor, ACP Physician and Practice Timeline and American EHR.

For more information, visit https://www.acponline.org/advocacy/where_we_stand/patients_before_paperwork/
ACP Public Policy & Advocacy
Your Advocate for Internal Medicine on Capitol Hill

Work in a constructive and bipartisan way with the President and with Congress to achieve progress on the College’s policy objectives.

ACP’s advocacy themes:

- Reducing administrative complexities and burdens
- Reduce barriers to access (i.e. ACA, behavioral/mental health, health disparities, Medicaid expansion, telemedicine, VA)
- Make healthcare affordable (i.e. RX pricing, high value care)
- Improve population and public health (climate change, firearms, opioids)
- Improve health care delivery to achieve greater value (i.e. MACRA/QPP, fee schedule, quality measures)
- Ensure there are enough well-trained internists in the numbers needed (i.e. GME reform, primary care workforce)
- Make internal medicine practice more satisfying (i.e. quality measure relevance)
Advocacy efforts to prevent ACA repeal without replacement

- ACP remains committed to sustaining the gains made by the Affordable Care Act (ACA)
- ACP Online offers information on how the federal health care law affects internists, their practice, and their patients.
  - Recent statements
  - State-by-state analysis
  - ACP Leaders on Potential Repeal of the Affordable Care Act (Video)

ACP President Nitin S. Damle, MD, MS, MACP addresses the crowd at a Johnston, Rhode Island rally in support of the Affordable Care Act
Recent ACP Policy Papers

- Addressing the Increasing Burden of Health Insurance Cost Sharing (July 2016)
- Financing U.S. Graduate Medical Education: A Policy Position Paper of the Alliance for Academic Internal Medicine and the American College of Physicians (May 2016)
- Climate Change and Health: A Global Call to Action (April 2016)
- Stemming the Escalating Cost of Prescription Drugs (March 2016)
- Medicaid Expansion: Premium Assistance and Other Options (March 2016)
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 https://cqrcengage.com/acplac/
- To learn more, contact Shuan Tomlinson:
  - Tel: 202-261-4547
  - Email: stomlinson@acponline.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 and ACP Gastroenterology Monthly

ACP Gastroenterology Monthly: ACP’s newest free monthly e-newsletter informs primary care physicians of current literature in gastroenterology/hepatology

DynaMed Plus™

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

- Free access for members
- Includes overviews and recommendations for more than 750 topics, 2,500 searchable images and numerous calculators
- Mobile apps available for Android and iOS
- Sign up at www.acponline.org/clinical-information/clinical-resources-products/dynamed-plus-a-new-benefit-for-acp-members
ACP members enjoy free or substantially discounted resources to help with MOC:

- **MKSAP 17**
  - 1,200 new self-assessment questions
  - Used by over 90% of residents for board preparation

- **Board Basics 3**
  - Dozens of classic images, core content and tips on how to take the ABIM exam

- **Courses**
  - MOC Exam Prep Courses and Internal Medicine Board Review Courses
  - Live review courses and recordings
The Center’s primary focus is to promote principles of partnership between patients, families, and clinicians to improve care and outcomes. Major initiatives include:

- Partnering with patient and consumer groups to bring the patients’ voice to ACP activities
- Development of clinician educational programs and resources focused on patient and family engagement to improve access, care coordination, and medication management
- Identifying opportunities for patients and families to participate in healthcare professional education, such as collaborating as faculty on educational programs
- Development of patient education resources to support patient self-management, enhanced communication, and shared decision-making
- Offering a library of over 100 resources – www.acponline.org/patient_ed
Internal Medicine Meeting 2017:
ACP’s Annual Scientific Meeting

Register to attend:
March 30-April 1, 2017
San Diego, CA

- Over 200 educational, interactive workshops; Dedicated Hospitalist track
- Case-based sessions and feedback on challenging patient management problems
- Register online at https://im2017.acponline.org/for-meeting-attendees/internal-medicine-meeting--rates
Professional Development

- ACP Leadership Academy
- Ethics manual & case studies
- Mentoring and networking
  ✓ at the chapter and national levels
- ACP Associate Poster Competition
- ACP Member Forums
- Career Connection
  ✓ a comprehensive listing of career opportunities for physicians
Professional & Personal Benefits

- **Mercer Consumer:** Offering personal insurance options including life, disability, long-term care and auto/homeowners through leading insurance companies
- **Mercer Professional Liability Insurance:** Offering a CHOICE model for members to shop in one place for the liability policy and price that fits their needs
- **Bank of America:** Offering BankAmericard Cash Rewards™ Visa Signature® with low introductory APR and no annual fee which includes 24/7 complimentary concierge service, shopping protection and travel assistance/protection
- **SoFi:** Offers ACP members a rate discount when refinancing student loans through SoFi
Recruit-a-Colleague

- Recruit one colleague (U.S. only) and receive a $100 credit toward your 2016-17 annual dues
- Recruit two colleagues and receive a $200 credit toward your 2016-17 annual dues
- Recruit three colleagues and receive a $300 credit toward your 2016-17 annual dues
- Recruit four colleagues and enjoy free annual dues in 2016-17
- Sign up at www.acponline.org/rac
ACP Membership

- **Medical Student Member**
- **Resident/Fellow Member:**
  Internal medicine residents and subspecialty fellows-in-training
- **Member:**
  Internists and internal medicine subspecialists who meet ACP credentialing standards
- **Fellow:**
  Internists with notable accomplishments recognized by their peers
- **Physician Affiliate Member:**
  Physicians who are not trained in or practice in internal medicine
- **Non-Physician Affiliate Member (available in the U.S. only):**
  Physician assistants, nurse practitioners and other healthcare professionals
Become an ACP Fellow

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

- Published academician: author of at least 2 published articles in medical journals
- Commitment to continuing education: multiple certifications, recertification or MKSAP for score
- Active involvement in ACP: at least 5 years of membership & participation in ACP activities including national or local committees/councils
- Senior physician: distinguished career in internal medicine

www.acponline.org/FACP
ACP Continues to Grow

- Effective June 30, 2016, total membership is 148,000 and international membership is 14,215.

- ACP has 67 domestic chapters/regions and 19 international chapters.
International Representation

- 19 International ACP Chapters:
  Bangladesh, Brazil, Canada (6 chapters), Caribbean, Central America, Chile, Colombia, Gulf, India, Japan, Mexico, Saudi Arabia, Southeast Asian, and Venezuela.

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Support the Next Generation of IM

- Encourage a young person to understand the rewards of internal medicine as a career
- Convince a medical student to see the bright future of internal medicine
- Recommend general internal medicine to a resident
- Invite another internist to become an ACP member
- Sponsor a qualified ACP Member for Fellowship (FACP)
ACP . . . Get Connected

- **MyACP 2.0 – Coming Soon**
  Newly redesigned platform makes it easier for users to discover and access ACP content and resources throughout their visits to ACP Online.

- **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 on social media**
  ACP and *Annals of Internal Medicine* are using social media more than ever to communicate and share information relevant to internal medicine.
Thank you . . .

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