

# 2024 AMGA

# ANNUAL CONFERENCE

ORLANDO, April 9–12, 2024

**Immersion Session (\$)** Wednesday, April 10, 1:30 pm – 5:00 pm

## Improving Population Health: Addressing Care Inequity

Improving population health holistically requires organizations to address patients in a manner characterized by the treatment of the whole person, taking into account mental and social factors, rather than just the symptoms of an illness. It is not only good for business but also impacts value-based healthcare. This involves strategically prioritizing health equity and integrating it within the organization, making a cultural transformation, beginning in leadership, throughout all levels of the organization.

In 2024, health systems are now required to report performance measures for screening on five specific social determinants of health domains for admitted patients: food insecurity, interpersonal safety, housing insecurity, transportation insecurity and utilities. Therefore, now is the right time to learn how to successfully integrate health equity into your organization and learn not only how to identify disparities but how to address them for improved outcomes.

By not prioritizing this, we are not only neglecting the well-being of our communities but also incurring significant financial costs. In fact, it is estimated that the lack of attention to health equity is costing the healthcare industry approximately \$320 billion in annual healthcare spending. If we continue to ignore this issue, this cost could grow to \$1 trillion or more by 2040. It is crucial for us to take action and explore innovative solutions to address this potential crisis. By doing so, we can not only improve the health outcomes of our patients but also contribute to the overall well-being of our society. This session provides innovative solutions and strategies to address this issue head on.

Upon completion of this activity, participants should be able to:

- Explain how the components of a framework for prioritizing health equity could be applied at their organization.
- Understand the impact of healthcare disparities on patient well-being and outcomes, and explain the benefits of a community partnership in promoting ongoing support for a specific population.
- Define SOGI-P and explain how to leverage its data to identify disparities within their served community.
- Describe how their approaches mimic and differ from those in the session.

**Credit Hours: 3 CME; 3 CPE; 3 ACHE Qualified Education**

1:30 pm – 1:35 pm

### Welcome & Overview

*Moderator: Danielle Casanova, MBA, Vice President, Population Health Initiatives & Health Equity, AMGA*

1:35 pm – 2:25 pm

### The Business Case for Prioritizing Equity in Population Health Improvement

*Georgia McGlynn, RN, MSN-CNL, CPHQ, Manager, Office of Population Health and Accountable Care; and Reshma Gupta, MD, MSHPM, Chief of Population Health and Accountable Care, UC Davis Health*

This 50-minute interactive workshop will provide participants with a framework to help them make a business case for prioritizing health equity at their local institutions. Presenters from **UC Davis Health** will highlight their approach to promote equity and participants will complete an activity that will help them identify where to begin.

Reflection question for participants: What is my organization's current stage in the health equity journey (beginner, intermediate, advanced)?

2:25 pm – 3:15 pm

### Team Approach to Reducing Disparities in Hypertension Management: The Express Blood Pressure Program

*Denise White-Perkins, MD, PhD, Interim Chair, Department of Family Medicine; and Director, Healthcare Equity Initiatives, Office of System Diversity Equity and Inclusion; and Octavia Solomon, PharmD, Pharmacy Specialist, Detroit Northwest Medical Center, Henry Ford Health*

The Express Blood Pressure Program is a multidisciplinary, data driven, team-based intervention utilizing PDSA cycles to improve blood pressure (BP) control in African American men. This presentation will address the inclusion of multidisciplinary roles to support patients in addressing BP control and screening for SDOH impacting BP management.

Reflection question for participants: How can my organization utilize PDSA cycles of improvement to develop and/or refine our model for addressing care needs of at-risk populations?

3:15 pm – 3:30 pm

Break

3:30 pm – 4:20 pm

### Navigating the Cultural, Clinical Care, and Operational Challenges of Implementing the SOGI-P Questionnaire

*Howard Mun, PharmD, CPHQ, Clinic Network Director, Ambulatory Quality & Safety; and Gillian Batchelder, PA, Clinic Network Manager, Ambulatory Quality, University of Washington Valley Medical Center*

Beginning in 2023, Washington State regulatory agencies began requiring hospitals to collect more information about Sexual Orientation and Gender Identity (SOGI); Race, Ethnicity and Language (REaL); and disability status when admitting patients to the hospital. In addition, as a participant in the NCQA-affiliated Patient-Centered Medical Home (PCMH) recognition program, all Primary Care Clinics will be required to collect SOGI-P (SOGI-Pronouns) data in 2024. This presentation will review lessons learned in the roll-out of SOGI-P data collection at different pilot sites before adoption throughout **Valley Medical Center's** Clinic Network.

Reflection question for participants: How can my organization roll out processes similar to SOGI-P at different sites/facilities, without increasing patient agitation and clinic disruption during the application of its data collection?

4:20 pm – 4:55 pm

#### Roundtable Discussion

Moderator: **Danielle Casanova, MBA**, Vice President, Population Health Initiatives & Health Equity, AMGA

During this session, attendees will be able to raise any topics they would like to discuss with the other medical group members at their table.

4:55 pm – 5:00 pm

#### Closing Comments

Moderator: **Danielle Casanova, MBA**, Vice President, Population Health Initiatives & Health Equity, AMGA

### **CONTINUING EDUCATION:**

**Disclosures:** None of the planners for any of the accredited activities have relevant financial relationships to disclose with any ineligible company whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

**Physicians, Nurse Practitioners, Registered Nurses, and Physician Assistants (CME Credit):** AMGA is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. AMGA designates this live educational activity for up to **3** AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. For the purpose of recertification, the American Nurses Credentialing Center (ANCC) and the National Commission on Certification of Physician Assistants (NCCPA) accept AMA PRA Category 1 Credit™ issued by organizations accredited by the ACCME. With respect to individual states' requirements for continuing education, State Boards have final authority of the acceptance.

**CPAs (CPE Credit):** This group live activity is designated to provide continuing professional education credits in the field of “specialized knowledge”. No prerequisite requirements are necessary for this event. By attending this program, participants may earn up to **3** CPE credits. In accordance with the standards of the National Registry of CPE Sponsors, CPE credits are granted based on a 50-minute hour. AMGA is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. (NASBA Sponsor ID: 112939)

**American College of Healthcare Executives (ACHE Qualified Education Credit):** By attending this AMGA program, participants may earn up to **3** American College of Healthcare Executives (ACHE) Qualified Education hours toward initial certification or recertification of the Fellow of the American College of Healthcare Executives (FACHE) designation. Participants of this program who wish to have their attendance considered for ACHE Qualified Education hours should list it when they apply to the ACHE for advancement or recertification. Participants are responsible for maintaining a record of their ACHE Qualified Education hours.