



2022

HEADLINES & HIGHLIGHTS

PQA

A REVIEW OF PQA ACCOMPLISHMENTS

September 2021 - August 2022

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DEAR PQA MEMBERS,

PQA continues to play an important role in driving positive changes within the health care system. PQA members are at the heart of this work, contributing to the milestones we have achieved and those which we strive to achieve.

I [shared](#) these sentiments in December, and the past 12 months have demonstrated the critical role PQA's members have in optimizing medication use quality. As members, your support and engagement is instrumental in setting the trajectory and ensuring the sustainability of PQA for years to come.

Launching Blueprint 2025, we have set a bold vision for the future of PQA. This vision is focused on four key areas, including quality measure innovation and modernization, improving the quality of pharmacist-provided care, addressing health equity and diversity, equity, and inclusion, and ensuring organizational excellence.



As we reflect on the past year, PQA and its members have laid the foundation to achieve these four goals. In the past year, we have:

- Endorsed two pharmacy measures and a health plan measure.
- Further defined PQA's role in value-based care.
- Published the first edition of the PQA Social Determinants of Health Resource Guide.
- Convened diverse stakeholders to identify priority research areas for community pharmacy SDOH screening and intervention.
- Collaborated with members during the in-person 2021 PQA Leadership Summit and 2022 PQA Annual Meeting.

The collaborative efforts of PQA stakeholders have resulted in outstanding accomplishments this year, and this is only just the beginning. As we look ahead, there is a tremendous amount of work ahead to optimize health outcomes for patients. From adherence, safety, and appropriate use measures for health plans, pharmacy measures for use in value-based arrangements, and beyond, our organization remains focused on improving the lives of patients through higher quality of medication use.

I'm grateful for the leadership and vision of the PQA Board of Directors, team, and our members, and I want to thank you for your engagement and support in helping us meet our mission this year. I am excited for the future, and I look forward to working with each of you in the days ahead!

Kind regards,

Micah Cost, PharmD, MS, CAE
Chief Executive Officer
Pharmacy Quality Alliance



PQA AS A MEASURE DEVELOPER

Three New Measures Endorsed; Two Retired

PQA, through a majority of vote of its members, endorsed two new [pharmacy measures](#) and endorsed one [health plan measure](#).

Endorsed Measures:

- *Proportion of Days Covered Composite [Pharmacy] (PDC-CMP-PH)*
- *Specialty Pharmacy Turnaround Time [Pharmacy] (SP-TAT-PH)*
- *Migraine Preventive Therapy [Health Plan] (MPT)*

PQA Measure Development Priorities

1

Continued development of **health plan performance measures** for implementation in CMS quality programs

2

Continued development of **pharmacy performance measures** for use in value-based arrangements

3

Innovative pilots to advance measure development and implementation, and to demonstrate the value of medication use and pharmacist-provided care

PQA Appointed 17 Individuals to Serve on Health Plan PDC Composite Measure TEP

[PQA appointed 17 individuals](#) from member organizations to serve on a technical expert panel (TEP) to review and provide input on draft specifications for a health plan measure concept: Proportion of Days Covered (PDC) Composite.

The Health Plan PDC Composite TEP provided expert input on the concept, which was specified to provide one composite score reflecting health plan performance on multiple component adherence measures.

The draft measure description and specifications were informed and refined through TEP input. PQA aims for this measure concept to advance through its [consensus-based development process](#) and to be put forward for public comment and endorsement consideration by the end of 2022.



PQA AS A MEASURE DEVELOPER CONT.

PQA's Role in Value Based Care

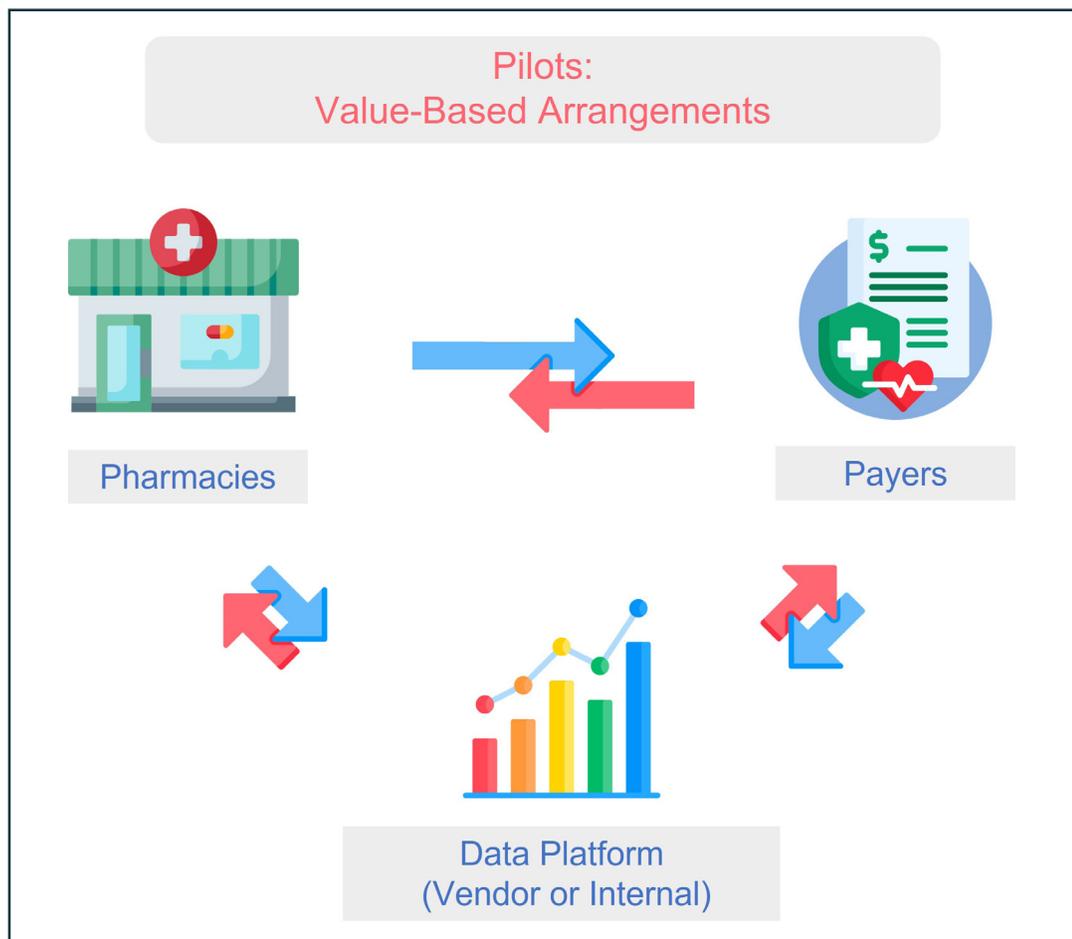
PQA has established its expertise in pharmacy measure development, endorsing two pharmacy measures in 2021 and continuing its development pipeline. PQA's CEO Micah Cost [discussed one of the new pharmacy performance measures](#) which measures composite adherence for diabetes, hypertension (renin angiotensin system antagonist) and high cholesterol (statin) medications.

PQA's updated [Pharmacy Measure Development Action Plan](#) outlines the future of pharmacy measure development. In support of this work, PQA sought interested pharmacy and payer partners to participate in [proof-of-concept pilots](#) to implement high priority blood pressure and hemoglobin A1c measure concepts in value-based payment arrangements (VBAs). Several partners were selected from the pool of interested organizations.

These pilots, in the context of pharmacy-payer VBAs, are designed to advance pharmacy quality measurement and patient care by evaluating the impact of innovative pharmacy services, gaining a deeper understanding of measure concept feasibility, and assessing value to stakeholders.

This project will pilot four pharmacy measure concepts in pharmacy-payer VBAs:

- Blood Pressure Control
- Blood Pressure Improvement
- A1c Control
- A1c Improvement





PQA AS A MEASURE STEWARD

Measure Use: Updates to Medicare Part D Program

PQA distributed a [summary of points of interest](#) for the CMS Announcement of Calendar Year (CY) 2023 for Medicare Advantage (MA) Capitation Rates and Part C and Part D Payment Policies to membership in Spring 2022.

Key highlights include:

- *Statin Use in Persons with Diabetes* (SUPD) measure will change from a weight of 3 to a weight of 1 for the 2023 Star Ratings,
- The opioid display page measures for the 2022 measurement year (2024 display page) will include palliative care as an exclusion, and
- CMS will begin reporting the *Persistence to Basal Insulin* (PST-INS) measure in the Patient Safety reports for the 2022 measurement year, and the addition to the display page for 2024 (2022 data) and 2025 (2023 data).

PQA reviewed all comments received on its measures and, where appropriate, engaged the PQA Measure Update Panel and Quality Metrics Expert Panel as part of the measure maintenance process to consider any necessary measure revisions.

Measure Maintenance

Over the past decade, PQA's measure portfolio has increased to more than 40 quality measures used in several CMS and other quality programs. This includes the Medicare Part D Star Ratings, the Health Insurance Marketplace Quality Rating System, and the Medicaid Adult Core Set. With the growth of the measure portfolio, the need to maintain and responsibly steward PQA measures has also grown.

PQA uses a systematic, consensus-based measure maintenance process led by the Measure Update Panel (MUP) and supported by the Quality Metrics Expert Panel (QMEP) to ensure specifications and associated value sets represent current clinical guidelines and the ever-changing medication landscape.

Two PQA Measures Retired

PQA, through a majority vote of its members, retired two health plan measures.

Retired Measures:

- *Drug-Drug Interactions [Health Plan] (DDI)*
- *Use of High-Risk Medications in the Elderly [Health Plan] (HRM)*

There are situations where it is appropriate to consider retiring a PQA-endorsed measure.

Potential reasons for considering measure retirement include:

- Evidence or clinical guidelines no longer support the original intent of the measure;
- Lack of use of a measure;
- Development of a new measure that better addresses the need; or
- Significant quality improvement and outcomes by providers and stakeholders has taken place, such that there no longer exists a margin for improvement.



PQA AS AN EDUCATOR

PQA Published Social Determinants of Health Resource Guide

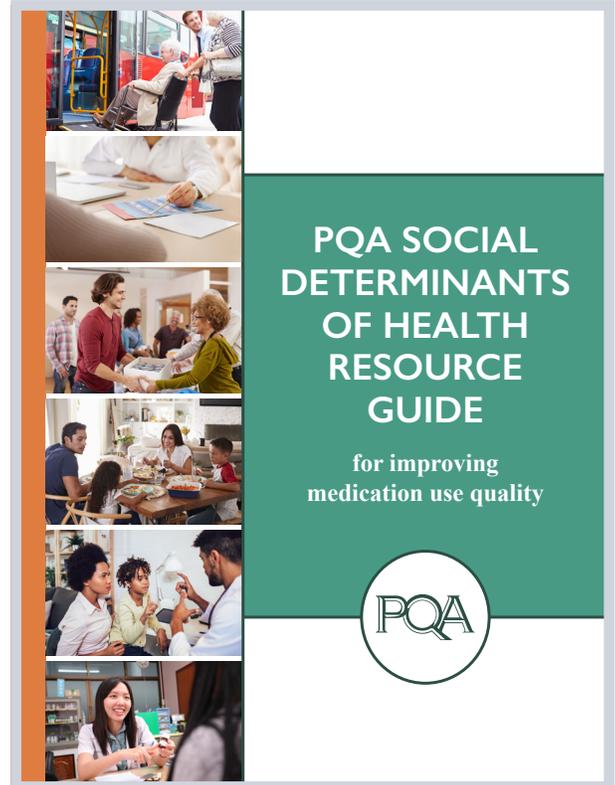
PQA published the first edition of the [PQA Social Determinants of Health \(SDOH\) Resource Guide](#).

The guide profiles real-world SDOH services that are promising for improving the quality and safety of medication use with a focus on initiatives conducted by or involving pharmacists or pharmacies.

The first edition includes 20 examples of SDOH screenings, referrals and interventions from across the nation. The guide provides information on each service's location, scale, target population, care setting, intervention and outcomes.

The examples profiled address at least one of seven SDOH barriers: Cost of Medications; Cultural or Literacy Barriers; Decent, Safe, and Affordable Housing; Food Security; Screening for Unmet Needs; Social Isolation; and Transportation.

A January [webinar](#) introduced the guide to PQA members, and a second edition of the guide is underway for publication by early 2023.



Medication Use Quality Certificate Program Expands to Include HIV Course

Human immunodeficiency virus (HIV) is a complex disease, and its prevention and treatment have progressed through scientific discoveries, clinical training, continuing education and widespread public health campaigns. However, gaps in knowledge and practice remain related to quality improvement and especially to medication use.

In response, PQA developed a [3-hour continuing education course, "Measuring Quality to Improve HIV Medication Use,"](#) to help pharmacists and other health care professionals evaluate and improve the quality of HIV-related care.

The course offers advanced training on HIV-related measurement and strategies to improve medication safety, adherence and appropriate use. It provides participants with practical tools and experiences to begin improving the quality of HIV care upon completion of the program.

It is available online through [PQA's Education Center](#). Visit [PQA's website](#) for details and instructions on how to access the program. This CE activity was supported by an independent medical education grant from Merck & Co.

Medication Use Quality Continuing Education Offered Live

Immediately preceding the 2021 PQA Leadership Summit and 2022 PQA Annual Meeting, PQA offered a half-day workshop, [Medication Use Quality: A PQA Live CE Event](#). The event featured education on the role of quality measurement in healthcare, quality measurement professionals, characteristics of good measures and measurement programs.

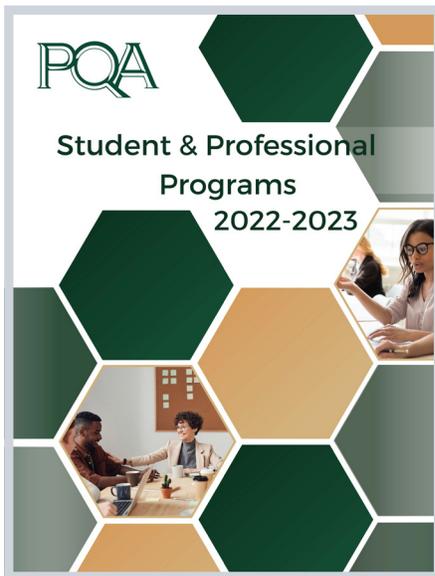
Attendees engaged with faculty in question-and-answer sessions and dynamic group discussions and activities. PQA plans to offer additional workshops in the coming year.



PQA AS AN EDUCATOR CONT.

Programmatic Highlights

- September 2021 - [Integrating Pharmacists in Value-Based Programs to Improve Performance on PQA Measures](#)
- October 2021 - [Forging Patient Connections: How Evidence-based Technologies Are Expanding Access and Adherence](#)
- November 2021 - [Medicare 2022 Star Ratings Update](#)
- December 2021 - [Statewide Collaboration Across Practice Settings to Improve Value-Based Care Outcomes](#)
- January 2022 - [Introducing the PQA Social Determinants of Health Resource Guide](#)
- February 2022 - [The 2021 Trend Report in Pharmacy Quality](#)
- March 2022 - [Quality Essentials: PQA Adherence Measures: Exploring the Impact and Dispelling Misconceptions](#)
- April 2022 - [Increasing Safe Medication Disposal](#)
- June 2022 - [Quality Essentials: Understanding PQA's Statin Use Measures](#)



PQA Student and Professional Programs

From Executive and Research Fellowships, summer internships, Advanced Pharmacy Practice Experience rotations, and MPH Practicums, PQA seeks to develop the next generation of quality professionals from a variety of backgrounds. Find full information on all programs [here](#).



PQA and its stakeholders worked collaboratively to achieve a number of milestones this year and set the trajectory for years to come. There is much to celebrate from this year, and even more to look forward to on the road ahead.

– PQA CEO Micah Cost





PQA AS A RESEARCHER

Patients and Pharmacists Addressing Social Determinants of Health Together

Addressing social determinants of health (SDOH) is a national priority, but patient preferences for SDOH screening and interventions in the community pharmacy setting is not as well understood.

It is vital that screening and interventions to address SDOH barriers are [co-developed by patients and pharmacists](#) for maximum effectiveness and relevance. Involving patients in the development, implementation and evaluation of such tools will ensure a focus on patients' health-related needs and desired health outcomes.

For these reasons, PQA and the Patient Advocate Foundation (PAF) convened diverse patients and pharmacy practitioners and researchers to identify and prioritize research topics and evidence needed to improve SDOH screening and interventions in community pharmacies. Supported by funding through a Patient-Centered Outcomes Research Institute ([PCORI](#)) Eugene Washington PCORI Engagement Award ([EASCS-23304](#)), the project focused on patient-centered outcomes (social need, non-clinical outcomes).

Throughout a series of activities across three meetings, pharmacy stakeholders and patients co-developed and prioritized a set of PCOR project ideas to assist patients in overcoming barriers related to SDOH, bolster community pharmacists' ability to effectively screen and address SDOH, and ultimately improve patients' health outcomes. The combination of engaging with both patients and stakeholders has yielded a list of prioritized PCOR research topics that are patient-centered, meaningful to both patients and stakeholders, and critical to improving patient outcomes. The results of this work will influence future PQA research and SDOH initiatives.



Medication Adherence: High-Impact, Relevant Measures

Medication adherence quality measures are relevant and high-impact, according to PQA's Ben Shirley, Melissa Castora-Binkley and Lisa Hines, whose [Population Health Management point of view article](#) was published online April 29.

They explain that adherence measures in the Centers for Medicare & Medicaid Services (CMS) Part D Star Ratings have contributed to immense public health benefits and savings over the last decade. As the measures evolve to integrate new data sources and address equity, their value to the health system will continue.



The Importance of SDOH and Pharmacist Intervention

PQA is [exploring the role of pharmacists and pharmacy services](#) in addressing patients' SDOH, including SDOH screenings and additional services that address barriers to medication access and increase medication adherence. PQA has fostered relationships with several institutions and stakeholders to address existing knowledge gaps about SDOH in the pharmacy setting.

In partnership with the Texas Center for Health Outcomes Research and Education at the University of Texas at Austin (TXCore), the PQA research team studied the capability of various PQA member organizations, including health plans and pharmacies, in collecting SDOH data and identifying barriers and facilitators in acquiring SDOH information.



PQA AS A RESEARCHER CONT.

The top barriers to collecting SDOH data were lack of standard data format, time and technological capabilities. The top facilitators in acquiring SDOH information included value-based payment programs that rewarded addressing SDOH needs and a coding structure or reimbursement mechanism for identification and management of SDOH. After assessing the organizations' perceptions on addressing SDOH, results indicated an anticipated increase in SDOH involvement in the future.

In addition to studying current trends and gaps in SDOH data collection in pharmacy settings, PQA also partnered with investigators from the University of Arizona to examine pharmacy accessibility in urban communities. The project focused on the SDOH area of neighborhood and build environment, exploring disparities in geographic inaccessibility to community pharmacies. Pharmacy accessibility scores, derived from distance and time thresholds, were used to categorize low, medium and high access to pharmacies. The study also found pharmacy accessibility varied by racial demographics and urban area.

Both studies fill important knowledge gaps on the existing landscape of SDOH and the role of pharmacies and pharmacists.

Pharmacy Access Metrics by Urban Area and Racial Composition				
	CHICAGO		DETROIT	
	White Census Tract	Non-White Census Tract	White Census Tract	Non-White Census Tract
Median Drive Time	11 minutes	13 minutes	19.5 minutes	17 minutes
Median Walk Time	6.6 minutes	9.1 minutes	18 minutes	13 minutes
10-Minute Walking Access	45%	28.6%	—	—
Minimum Distance to Pharmacy	0.33 miles	0.46 miles	1.8 miles	1.4 miles

Research Projects in Summary

Peer Reviewed Publications

[Trends in telephonic comprehensive medication review in the US from 2000 to present: A scoping literature review.](#) *Journal of the American Pharmacists Association*, 2022; 62: 406-412.

[Procurement and use of social determinants of health data among key health care stakeholders.](#) *Journal of Managed Care & Specialty Pharmacy*, 28(5), 538–543.

[Key informant perspectives about telephonic comprehensive medication review services in the United States.](#) *Journal of the American Pharmacists Association*, 2022; 62(3): 817-825.

Abstracts and Posters

Specialty Pharmacy Turnaround Time: Impediments, Facilitators, and Best Practices. [abstract in *Value in Health*. 2021;24]. *Value in Health*. 2021;24:S1.

Qualitative analysis of clinician-patient interactions during real-world telephonic comprehensive medication reviews in the US. *Journal of Managed Care Pharmacy*. 2021;27(4-a):Z8.

Pharmacist-conducted immunization assessment and documentation: Proof of concept. *Journal of Managed Care Pharmacy*. 2021;27(4-a):U22.

▶ PQA AS A CONVENER

PQA Annual Meeting

In May of 2022, PQA hosted over 330 medication use quality stakeholders in Baltimore, Md., for the 2022 PQA Annual Meeting. Attendees engaged with panels featuring healthcare thought leaders, educational breakout sessions presented by PQA's broad membership and networking opportunities with fellow quality professionals.



Highlights from the General Sessions:

- [The Current State and Future of Remote Care, Access to Telehealth](#)
- [At PQA, CMS Veteran Blum Highlights Policy Shifts and Rationale for Latest Rulemaking](#)
- [What's Required in Order to Fight Medication Use Quality Disparities](#)

Highlights from the Breakout Sessions and Posters:

- [Integrating Analytics with High-Touch Pharmacy Care for Vulnerable Beneficiaries](#)
- [Pharmacists Can Enhance Outcomes, Access for Patients with Diabetes in Health Systems](#)
- [Improving Population Health Can Start with Adjusting Traditional Pharmacy Solutions](#)
- [Adult Immunization Quality Landscape Presents Opportunities, Challenges](#)
- [Top Posters at the PQA Annual Meeting](#)
- [2022 PQA Annual Meeting Poster Abstracts in Print](#)



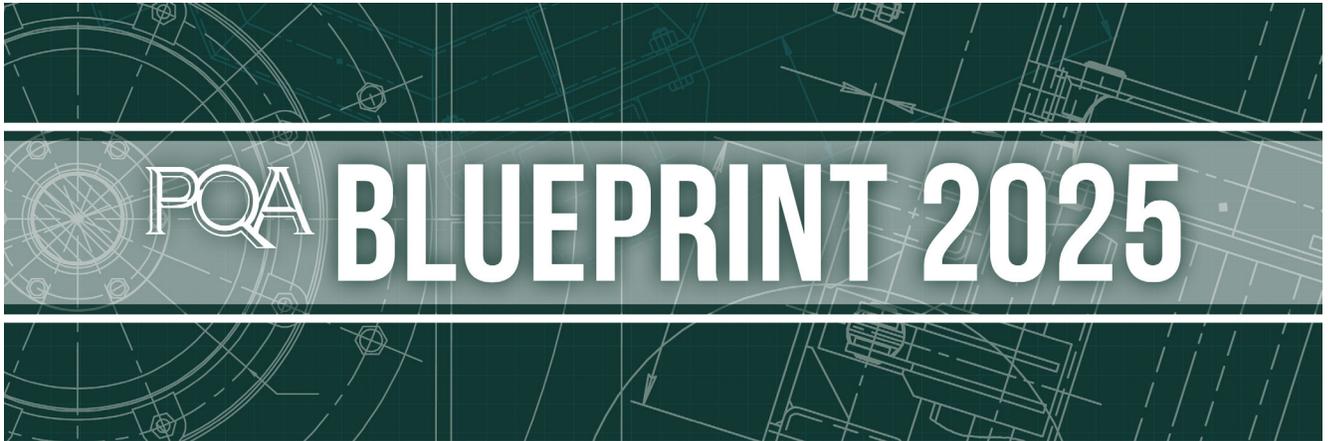
PQA Leadership Summit

The 2021 PQA Leadership Summit convened in Arlington, Va. from November 10-11, 2021. PQA brought together its members to shape Blueprint PQA 2025, our future vision for excellence. Over the course of two days, PQA stakeholders engaged in breakout discussions related to the Blueprint goals and objectives. This work was the capstone of the

strategic planning process. As outlined on the following page, the process began with a member survey to determine key areas of focus and culminated during the Leadership Summit.

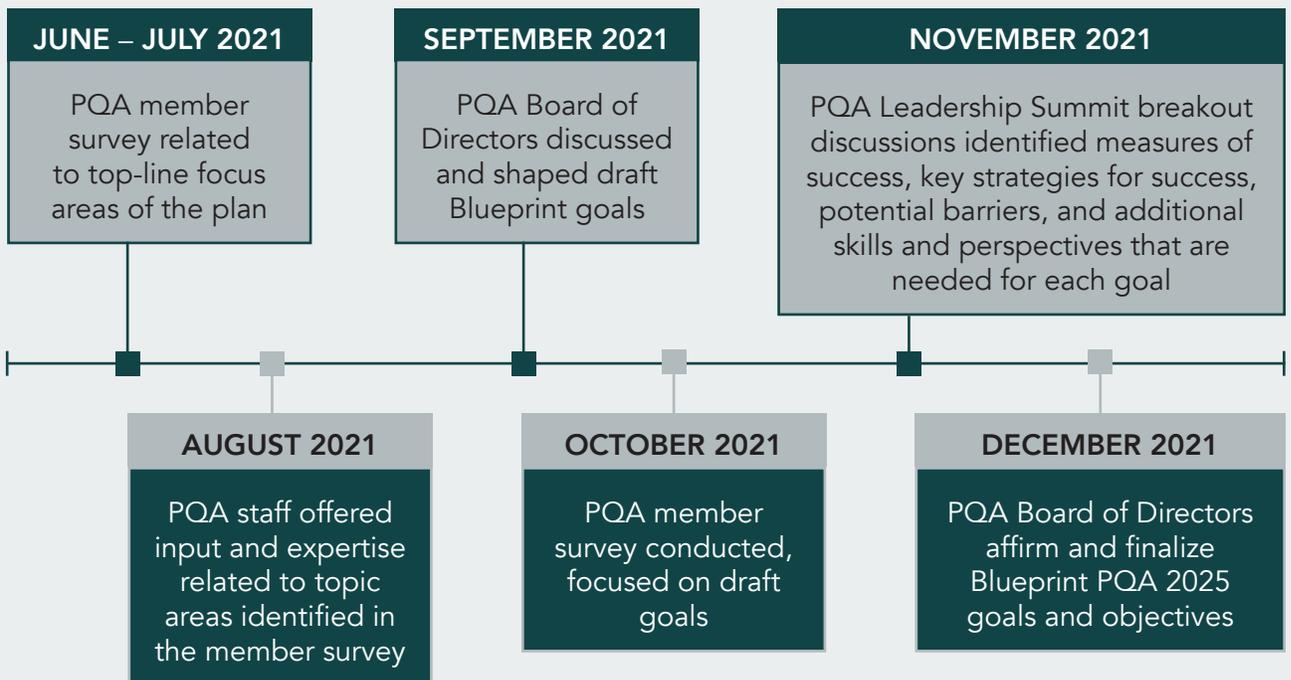


▶ BLUEPRINT 2025



GOAL 1	GOAL 2	GOAL 3	GOAL 4
Lead innovation and modernization of medication use quality to deliver solutions for a person-centered and value-based healthcare system.	Advance the quality of pharmacist-provided care and services that optimize medication use, adherence and safety.	Champion diversity, equity and inclusion and address health disparities in medication use quality.	Achieve organizational excellence through structure and processes that deliver exceptional value to our members and stakeholders.

Blueprint 2025 Development Timeline





PQA STAFF

The [PQA team](#) has continued to grow to meet the needs of members and deliver on our mission. Staff expertise is broad, with backgrounds in healthcare, association management, measure development and healthcare quality.

Senior Leadership

Micah Cost, PharmD, MS, CAE | *Chief Executive Officer*
Jacqueline Green | *Chief Operating Officer*
Lisa Hines, PharmD, CPHQ | *Chief Quality and Innovation Officer*
Richard Schmitz, MA | *Chief Engagement Officer*

Performance Measurement

Rachel Digmann, PharmD | *Senior Director, Performance Measurement*
Lynn Pezzullo, RPh, CPEHR, CPHQ | *Senior Director, Quality Innovation*
Carolyn Lockwood, RN, MSN | *Director, Performance Measurement*
Joel Montavon, PharmD, MBA | *Director, Performance Measurement*
Ben Shirley, CPHQ | *Director, Performance Measurement*
Heather Gibson, MSPH | *Associate Director, Performance Measurement*
Razanne Oueini, PharmD, MSc | *Executive Fellow*

Research

Melissa Castora-Binkley, PhD | *Senior Director, Research*
Megha Parikh, PhD, MS | *Senior Research Scientist*
Vito Mastrangelo | *Project Coordinator*

Engagement, Education and Convening

Loren Kirk, PharmD, CPHQ, CAE | *Senior Director, Strategic Partnerships*
Amanda Ryan, PharmD, BCGP, CPHQ | *Director, Education*
Virginia Sweeter, CMP | *Director, Convening*
Chris Kotschevar, PharmD, CPHQ | *Associate Director, Stakeholder Engagement*
Rachel Cormier, MA | *Communications Coordinator*
Freshta Rosario | *Stakeholder Engagement Coordinator*
Jasmine Perry, PharmD, RPh, BS | *Executive Fellow*

Operations

Christina McCloskey | *Senior Director, Operations and Human Resources*
Mel Nelson, PharmD, CPHQ, PMP | *Director, Program Management*
Kathi Gollwitzer | *Associate Director, Administrative Affairs*



2022 PQA BOARD OF DIRECTORS

Thank you to the [2022 PQA Board of Directors](#) for the time and input offered to PQA's mission. The PQA Board represents the broad stakeholders of PQA's membership and includes thought leaders and experts from across the healthcare spectrum. Their guidance shapes PQA's strategy in order to advance the safe and appropriate use of medications.

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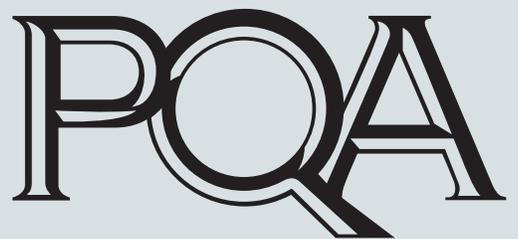
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National Association of Chain Drug Stores
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Alliance of Community Health Plans
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