



Optimizing Health by Advancing the Quality of Medication Use

December 31, 2018

Seema Verma, Administrator
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
P.O. Box 8013
Baltimore, MD 21244-8013

Attention: CMS-4185-P

Dear Administrator Verma:

The Pharmacy Quality Alliance (PQA) appreciates the opportunity to comment on the proposed rule on “Medicare and Medicaid Programs; Policy and Technical Changes to the Medicare Advantage, Medicare Prescription Drug Benefit, Program of All-Inclusive Care for the Elderly (PACE), Medicaid Fee-for-Service, and Medicaid Managed Care Programs for Years 2020 and 2021.” PQA applauds the Centers for Medicare & Medicaid Services (CMS) for efforts to continually review and refine the Medicare Advantage (MA) (Part C) and Prescription Drug Benefit (Part D) programs.

PQA is a transparent, consensus-based measure developer, established in 2006 as a public-private partnership by CMS, under the leadership of former CMS Administrator, Dr. Mark McClellan. Today, we stand as a non-profit, multi-stakeholder organization with over 240 members. Shortly after the implementation of the Medicare Part D Prescription Drug Benefit, PQA’s focus was to develop measures for use by CMS in the Medicare Part C & D Programs.

PQA members include pharmacists and other healthcare providers, pharmacies, health plans, pharmacy benefit managers, life sciences, technology vendors, government agencies, health information technology partners, researchers and academia.

PQA develops nationally-recognized, endorsed performance measures that address the safe and appropriate use of medications. These measures are used for public reporting, accountability and quality improvement across federal and state programs including Medicare, Medicaid, health insurance exchanges, accrediting organizations, provider networks and other healthcare-related alliances. PQA members have the opportunity to shape the measures we develop by serving on advisory panels and measure development groups to draft, test, refine, and endorse performance measures that focus on medication-use quality in high priority areas or to fill gaps in existing performance measures.

PQA’s comments on the proposed rule are below:

1. **CMS' proposal for Prescription Drug Plan (PDP) sponsors' access to Medicare Part A & B claims data extracts**
 - PQA applauds CMS for proposing to provide PDP sponsors with Medicare Part A & B claims data to: optimize therapeutic outcomes through improved medication use; improve care coordination to prevent adverse health outcomes; as well as other permitted uses of the data. These data can provide PDP sponsors with valuable insights into inpatient and ambulatory care services provided to beneficiaries, which can further their efforts to improve the health of populations.
 - To date, medication use quality measures intended to assess PDP performance have been limited primarily to those that can be calculated using Part D data. If Part A & B data are made available, as outlined in the proposed rule, PQA would look forward to opportunities to develop additional medication use quality measures for PDPs, leveraging expanded data sources to support improved medication use and outcomes.

2. **CMS' proposal to enhance the hierarchal clustering methodology to improve the stability and predictability of the cut points for measures in the Part C and D Star Ratings programs**
 - PQA applauds CMS' consideration of stakeholder feedback and its proposal to use that feedback to guide development of an enhanced methodology to increase stability and predictability of the cut points, while maintaining the goals of the Star Ratings program, the integrity of the methodology, and the intent of the cut point methodology (i.e., to accurately measure true performance).
 - As a consensus-based organization, PQA has engaged our health plan stakeholders and is considering their analyses using alternative methodologies that improve stability and predictability of the cut points. We would be pleased to contribute to efforts to determine the most suitable methodology.

PQA appreciates CMS' thoughtful consideration of our comments submitted in response to the proposed rule. If you have questions, please do not hesitate to contact us.

Respectfully,



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