

April 6, 2020

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-4190-P

Dear Administrator Verma:

As quality-focused healthcare organizations and members of the Pharmacy Quality Alliance (PQA), we appreciate the opportunity to comment on the proposed rule for “Medicare and Medicaid Programs: Contract Year 2021 and 2022 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicaid Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly.” We applaud the Centers for Medicare & Medicaid Services (CMS) for efforts to continually strengthen and modernize the Medicare Part D program.

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. Shortly after the implementation of the Medicare Part D Prescription Drug Benefit, PQA’s focus was to develop medication use measures for use by CMS. Today, PQA is a non-profit, multi-stakeholder, quality organization with more than 240 members. As PQA members, we represent community pharmacy organizations, specialty pharmacy organizations, pharmacists and other healthcare providers, pharmacies, health plans, pharmacy benefit managers, patient advocacy organizations, life sciences, technology vendors, government agencies, health information technology partners, accrediting organizations, researchers and academia.

As PQA members, we jointly provide this comment on the proposed rule.

Establishing Pharmacy Performance Measure Reporting Requirements (§ 423.514)

We are pleased that CMS in this section (on pages 9064-65 of the [Federal Register published on February 18, 2020](#)) acknowledges, encourages and provides recommendations for the development of “a set of pharmacy performance measures through a consensus process.” Further, we appreciate CMS’ recognition of PQA’s efforts and progress to work with the industry to establish a consensus set of measures. Like CMS, we are encouraged by the progress being made. Developing and adopting pharmacy performance measures is an important step towards a higher-quality health care system. A standard, national set of pharmacy measures can

incentivize and support pharmacist-provided care, which can play an important role in improving patient experiences and health outcomes.

We believe that:

1. PQA is the right organization to continue bringing the industry together to develop a set of pharmacy performance measures through a consensus and transparent process. PQA is an established measure developer:
 - with experience developing evidence-based, clinical quality measures for Medicare Part D that address the safe and appropriate use of medications,
 - that serves as a neutral convener of all relevant stakeholders on this issue, including patients, health plans, pharmacy benefit managers, chain and independent pharmacies, government agencies, specialty pharmacy providers, pharmacist practitioner organizations, and
 - that stewards its measures, including completing necessary maintenance at least annually.

PQA has a proven track record of developing and maintaining measures for use within the Medicare Part D quality programs, including the Star Ratings, the display page and the patient safety reports produced for plan sponsors. PQA, as a neutral convener, is in a unique position to gather the necessary perspectives to create successful measures, given its membership is composed of pharmacy organizations, pharmacists, health plans and pharmacy benefit managers among other medication quality-interested organizations.

PQA members have the opportunity to shape the measures PQA develops by serving on advisory groups and technical expert panels 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 measure development process is patient-centered and includes participation from individuals with lived experience that relates to the measures under development. Patient partners participate on advisory groups and panels to provide the patient perspective throughout all phases of measure development. Additionally, PQA provides public comment periods at various points within its measure development process. This allows measure concepts and draft measures to be vetted even more broadly beyond PQA's membership, providing all healthcare organizations that would be impacted by a standard set of measures the opportunity to provide feedback.

Given its experience and consensus approach to measure development, PQA is best-positioned to develop evidence-based measures and importantly, to test the measures for their intended use (i.e., level of analysis and populations of focus), to ensure they are feasible, valid and reliable.

2. [PQA is continuing consensus-based work](#) with the industry in 2020 to develop additional measures. Insights learned during the initial work are informing PQA's approach to its continued efforts in building a set of pharmacy measures. We are encouraged by the progress made and PQA's current focus on de novo pharmacy measure concepts, focused on patient health outcomes and areas of care and quality performance that pharmacists can impact.
 - PQA began in early 2019 a consensus-driven process to identify and prioritize measure concepts that could constitute a set of pharmacy performance measures. Through this process, PQA developed an initial standard set of measures appropriate for assessing pharmacy performance and use in accountability programs. This initial phase of work included an expedited process to develop pharmacy measures adapted from existing PQA health plan measures used in Part D quality programs. PQA conducted this work in an expedited fashion to develop an initial set of pharmacy measures that could be made available for Contract Year 2021 within Medicare.
 - The work resulted in [three PQA-endorsed pharmacy performance measures](#) – *Proportion of Days Covered (PDC): Renin Angiotensin System Antagonists (Pharmacy) (PDC-RASA-PH)*, *PDC: Statins (Pharmacy) (PDC-STA-PH)*, and *PDC: Antiretroviral Medications (Pharmacy) (PDC-ARV-PH)* – which are calculated using administrative claims data and reported at the aggregate Medicare line of business.

3. CMS should commit appropriate funding and a timeline to support the development of a set of pharmacy performance measures.
 - Pharmacy performance measures, focused on pharmacist-provided care, pharmacy-based services and beneficiary outcomes, will require novel data sources not previously used in performance measurement, and more extensive testing to ensure that they are feasible, valid and reliable.
 - The allocation of appropriate resources will allow a measure set to be developed and implemented in a timely manner.
 - CMS should develop a timeline for use of these measures in Part D. That timeline should be informed by a public comment period or industry input, considering that network pharmacy agreements are often developed 12-15 months in advance of a contract year.

We appreciate CMS' thoughtful consideration of our comments submitted in response to the proposed rule.

Respectfully,

Academy of Managed Care Pharmacy
Accreditation Commission for Health Care
AIDS Healthcare Foundation
Albertsons Companies
AllazoHealth

American Association of Colleges of Pharmacy
American College of Clinical Pharmacy
American Pharmacists Association
American Pharmacy Cooperative
American Society of Consultant Pharmacists
American Society of Health-System Pharmacists
Amgen
Amplicare
Aspen RxHealth
Association for Community Affiliated Plans
Blue Shield of California
Cardinal Health/OutcomesMTM
Center for Quality Medication Management, University of Florida
Clarify Health Solutions
Cognizant Technology Solutions
CSS Health
CVS Health
Discern Health
DocStation
Drake University College of Pharmacy & Health Sciences
Enhanced Medication Services
GlaxoSmithKline
Gorman Health Group
Healthfirst
Healpointe Solutions, Inc.
Humana
Kinney Drugs
The Kroger Co.
Magellan Rx Management
MarkeTouch Media
McKesson Corporation
MTMCare, Inc.
National Alliance of State Pharmacy Associations
National Association of Chain Drug Stores
National Association of Specialty Pharmacy
National Community Pharmacists Association
National Health Council
National Patient Advocate Foundation
Navitus Health Solutions
National Council for Prescription Drug Programs
Network for Excellence in Health Innovation
NOVA ScriptsCentral
Ohio Northern University Raabe College of Pharmacy
Ohio State University Wexner Medical Center
PCPI

Pennsylvania Department of Health
PerformRx
PillPack, LLC
Pharmacy Quality Solutions
Precision for Value
Prime Care Health Solutions
PRS Pharmacy Services
Rite Aid
SCAN Health Plan
STChealth LLC
St. Louis College of Pharmacy
Thrifty White Pharmacy
University of Arizona College of Pharmacy
University of Colorado Skaggs School of Pharmacy and Pharmaceutical Sciences
University of Minnesota College of Pharmacy
University of Mississippi Center for Pharmaceutical Marketing & Management
University of Wyoming
URAC
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