

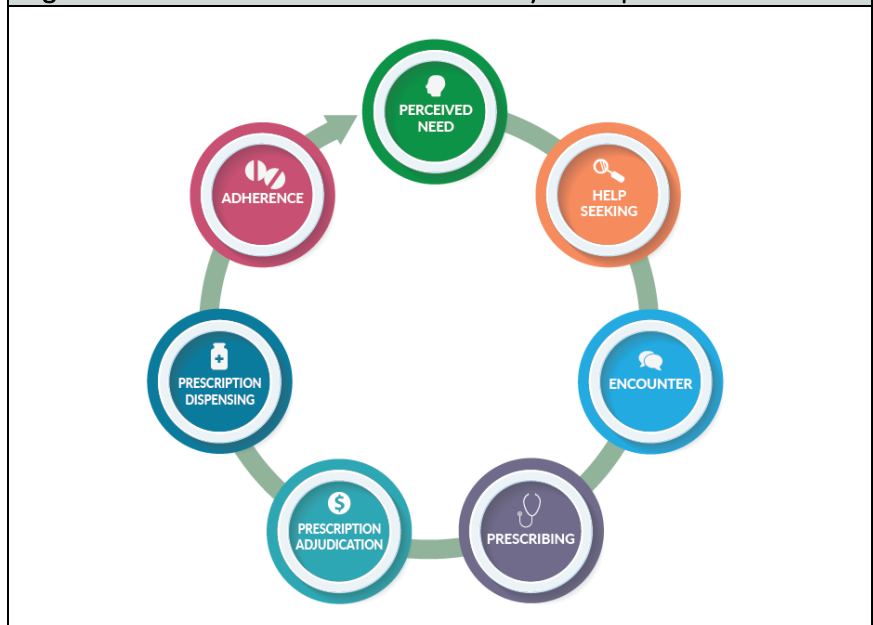
Pharmacy Quality Alliance (PQA) and National Pharmaceutical Council (NPC) Request for Proposals – Addressing Barriers to Medication Access

Proposal Topic

Access to necessary medications for both acute and chronic conditions is of keen interest and concern to patients, providers, and policymakers.^{1,2} Medication underuse (i.e., nonadherence) is associated with excessive healthcare resource utilization and an estimated \$100 - \$290 billion annually in the United States (US).^{3,4,5} Improved healthcare accessibility for patients is a recognized priority within the National Quality Strategy (NQS).⁶ However, even with legislative efforts (e.g., Affordable Care Act) that have attempted to improve access to care, the US still faces significant medication access challenges.^{7,8} As the US healthcare system continues to shift from a volume-based to a value-based care delivery system, quality performance measurement provides an opportunity to assess and incentivize appropriate medication access.

In 2018, PQA, with support from NPC, convened a multi-stakeholder Access to Care Roundtable to develop a conceptual framework to better define medication access, beyond adherence, and to identify priority gaps for future quality performance measurement targeting medication access. Named the [Medication Access Patient Journey \(MAPJ\)](#), this conceptual framework is comprised of seven nodes that patients encounter while attempting to gain access to medications (Figure 1). Consisting of Perceived Need, Help Seeking, Encounter, Prescribing, Prescription Adjudication, Prescription Dispensing, and Adherence, the framework is cyclic in nature, beginning with a

Figure 1. Medication Access Patient Journey Conceptual Framework



¹ DiJulio B, Firth J BM. Kaiser Health Tracking Poll: August 2015 | The Henry J. Kaiser Family Foundation. <https://www.kff.org/health-costs/poll-finding/kaiser-health-tracking-poll-august-2015/>. Published 2015. Accessed May 29, 2019.

² Lichtenberg FR. The Impact of New Drug Launches on Longevity: Evidence from Longitudinal, Disease-Level Data from 52 Countries, 1982?2001. *Int J Health Care Finance Econ.* 2005;5(1):47-73.

³ Viswanathan M, Golin CE, Jones CD, et al. Interventions to Improve Adherence to Self-administered Medications for Chronic Diseases in the United States. *Ann Intern Med.* 2012;157(11):78.

⁴ Heisler M, Choi H, Rosen AB, et al. Hospitalizations and Deaths Among Adults With Cardiovascular Disease Who Underuse Medications Because of Cost. *Med Care.* 2010;48(2):87-94.

⁵ Rosenbaum L, Shrank WH. Taking Our Medicine-Improving Adherence in the Accountability Era. 2013.

⁶ Agency for Healthcare Research and Quality. The National Quality Strategy: Fact Sheet. <https://www.ahrq.gov/workingforquality/about/nqs-fact-sheets/fact-sheet.html>. Published 2016. Accessed May 29, 2019.

⁷ Patient Protection and Affordable Care Act (2010; 111th Congress H.R. 3590) - GovTrack.us. <https://www.govtrack.us/congress/bills/111/hr3590>. Accessed May 29, 2019.

⁸ Sarnak DO, Squires D, Kuzmak G, Bishop S. Paying for Prescription Drugs Around the World: Why Is the U.S. an Outlier? The Commonwealth Fund. <https://www.commonwealthfund.org/publications/issue-briefs/2017/oct/payingprescription-drugs-around-world-why-us-outlier>. Published 2017. Accessed May 29, 2019.

patient's awareness of an illness or condition that induces a need to seek treatment (Perceived Need) and ending with adherence to treatment (Adherence) or reentry into the cycle for further evaluation and care.

Building from existing healthcare utilization frameworks, the Roundtable identified a holistic approach to defining medication access and mapped common barriers patients encounter in gaining access to medications, including social determinants of health (SDOH). Lastly, the Roundtable provide key recommendations that provide a vision for meaningful interventions to fill gaps in the literature concerning access to care.

Proposal Scope

PQA and NPC are interested in exploring these important questions and are commissioning new research pertaining to: quality measurement targeting improved medication access; the impact of various factors, including SDOH, on medication access; and new models of care delivery to improve medication access.

PQA and NPC are interested in, but are not limited to, the following research questions:

1. How can we use SDOH data within quality measurement?
2. How can care delivery models incorporate the MAPJ to address medication access?
 - How is success measured at each node?
 - What are potential incentive mechanisms to target medication access challenges and to provide appropriate interventions?
 - How can the MAPJ and performance measurement be leveraged to evaluate new payment models by the Center for Medicare and Medicaid Information, such as the Oncology Care Model (OCM)?
 - How can community-based organizations be best equipped to play a role?
3. Do specific nodes of the framework have a greater impact on medication access?
4. Does the development and/or implementation of a medication access screening tool improve medication access?
 - How should medication access be measured, beyond adherence?
 - Would a medication access screening tool be meaningful to patients?
 - When, at what frequency, and in what setting(s) will the tool have the most utility?

While PQA and NPC are interested in proposals that focus on the questions described above, we welcome and encourage all research ideas that are pertinent to this topic, even if they are not explicitly addressed in the questions above. Proposals that include diverse perspectives in addressing these research questions are particularly encouraged. While budget and timeframe are project specific, shorter-term projects between \$50,000 - \$100,000 with timeframes of <12 months will be given higher priority in review. Serious consideration will be given to exceptional proposals that exceed \$100,000. PQA research activities have an indirect cost cap of 10%.

Final awardees will present their work at PQA's Annual Meeting 2021.

Disclaimer: PQA and NPC reserve the right not to award funding if submitted proposals do not meet the criteria.

Submission Guidelines

Submissions will be evaluated based upon a combination of factors, including: the potential impact of the research; availability of data and content; project duration; probability of technical success; cost; and to what extent the research is important to key audiences. An [informational webinar](#) including time for Q&A will be hosted on December 12, 2019 at 1:00 PM ET.

Submissions should be sent to research@pqaalliance.org and should conform to [the proposal template](#). PQA and NPC will use a staged approach to review submissions. Initial concept proposals should be no more than 1 page and are due no later than **5:00 PM ET on January 10, 2020**. Those selected will have an opportunity to expand and refine their concept in a formal 5-10 page proposal. Concept proposals must be submitted no later than **5:00 PM ET March 10, 2020**. PQA and NPC will follow-up with all research proposals within eight weeks of the submission deadline.

If you have any questions, please contact research@pqaalliance.org. Thank you for your interest and participation.

About PQA's Research

Established in 2006, the Pharmacy Quality Alliance is a 501(c)3 designated non-profit alliance with over 240 member organizations. PQA is a multi-stakeholder, consensus-based membership organization committed to its mission of improving the quality of medication use and management across healthcare settings with the goal of improving patient health.

PQA's commitment to this goal is evident through a strong track record and significant expertise in the development and implementation of impactful medication-related performance measures. In addition, PQA has extensive experience in research and demonstration projects with an emphasis on medication-use quality.

About NPC's Research

The National Pharmaceutical Council (NPC) is a health policy research organization dedicated to the advancement of good evidence and science, and to fostering an environment in the United States that supports medical innovation. NPC focuses on research development, information dissemination, education and communication of the critical issues of evidence, innovation and the value of medicines for patients.

NPC's current research examines the most pressing topics related to real-world evidence, the optimal role and value of pharmaceuticals in emerging payment and delivery models, and biopharmaceutical and health system innovation.

Timeline

A timeline for submission, review, award, and project period has been provided below.

	2019		2020				
	11	12	1	2	3	4	5
Request for proposals (RFP) announced							
RFP Informational Webinar							
Initial 1-page concept proposal due							
Initial concept review period							
Full proposal applicants invited							
Full proposal due							
Full proposal review period							
Awardees announced at PQA 2020 Annual Meeting							

Key Dates

November 19, 2019	Request for Proposals (RFP) announced at 2019 PQA Leadership Summit
December 12, 2019	RFP Informational Webinar with Q&A
January 10, 2020	Initial 1-page concept proposal due no later than 5PM ET
February 7, 2020	Full proposal applicants invited
March 10, 2020	Full proposal due no later than 5PM ET
May 13-15, 2020	Awardees announced at the 2020 PQA Annual Meeting