



2019 PQA Annual Meeting Agenda*

**All programming subject to change*

Wednesday, May 15, 2019

Pre-Meeting Events

7:30am	5:30pm	Registration Open
8:30am	10:30am	Strategic Partnerships Council <i>(by invitation)</i>
9:30am	12:30am	Research Coordination Committee (RCC) & Executive Research Advisory Council (ERAC) Combined Meeting <i>(by invitation)</i>
10:00am	12:00pm	Implementation Advisory Panel (IAP) Meeting <i>(by invitation)</i>
11:00am	2:30pm	PQA Board of Directors' Meeting <i>(by invitation)</i>
1:00pm	3:15pm	Exhibits Open
1:00pm	2:00pm	PQA/CVS Health Foundation Scholars Session <i>(by invitation)</i>
1:00pm	2:30pm	Volunteer to Save a Life: A Naloxone Training Opportunity <i>(open to all attendees)</i>
2:00pm	3:00pm	Academic Affairs Committee (AAC) Meeting <i>(by invitation)</i>
2:30pm	3:15pm	First Timers & New Members Orientation Session

2019 Annual Meeting

3:30pm 5:00pm **Opening General Session**

PQA State of the Alliance Address

Laura Cranston, RPh, Chief Executive Officer, Pharmacy Quality Alliance

Keynote

John O'Brien, PharmD, MPH, Senior Advisor to the Secretary for Drug Pricing Reform, U.S. Department of Health and Human Services

Plenary Discussion: Embracing Innovation, Disruption and Integration to Achieve High-Quality Healthcare

- Experts will discuss how companies are disrupting healthcare through horizontal and vertical integration to improve efficiency, drive better quality and bend the healthcare cost curve, describe how innovations in healthcare delivery and efforts to address the social determinants of health are changing the face of healthcare, and discuss how public policy and regulatory changes, new value-based models of care, consolidation, and deeper integration across the healthcare system are likely to impact patient-centered care.
 - **Marc Boutin**, JD, Chief Executive Officer, National Health Council
 - **William Fleming**, PharmD, Segment President, Healthcare Services, Humana
 - **David Medvedeff**, PharmD, PhD, Chief Executive Officer, Aspen RxHealth
 - **Jerry Penso**, MD, MBA, President & Chief Executive Officer, AMGA (Moderator)



- Additional Speakers TBD

5:00pm 6:30pm Welcome Reception/Exhibits Open
 6:30pm 9:00pm PQA Leadership & Sponsors Appreciation Dinner *(by invitation)*

Thursday, May 16, 2019

6:00am 7:15am PQA Fun Run/Walk - *led by the Baltimore chapter of "Back on My Feet"*
 6:45am 5:30pm Registration Open
 7:15am 8:35am Exhibits Open/Continental Breakfast
 7:15am 8:35am Innovation Theaters

8:45am 10:00am General Session

Keynote: The Unsung Role of the Pharmacist in Patient Health

Aaron E. Carroll, MD, MS, Professor of Pediatrics, Associate Dean for Research Mentoring, and Director of the Center for Health Policy and Professionalism Research, Indiana University School of Medicine

Plenary Discussion: Engaging Healthcare Media Today

- Healthcare grows more complex and the number of non-traditional providers increases every year. Simultaneously, newsrooms continue to shrink, and audiences receive their information from an increasingly diffuse set of media. From clinical care to the business of healthcare, how can companies and associations ensure their voice is heard in trade, policy and consumer media? How should communicators focus their time and resources in a competitive and rapidly changing environment? Experts will share their insights for effectively engaging media today.
 - **Aaron E. Carroll, MD, MS**
 - **Ceci Connolly**, President & Chief Executive Officer, Alliance of Community Health Plans
 - **Dan Leonard, MA**, President & Chief Executive Officer, National Pharmaceutical Council
 - **Joyce Frieden**, Washington Editor, MedPage Today (Moderator)

10:00am 10:30am Exhibits Open/Break

10:30am 11:00am Quick Quality Quips – Session 1

Q1-A

Strategies to Expand Value-Based Pharmacist-Provided Care: Your Action Guide

- From medication synchronization to diverse clinical services, pharmacist-provided care is the future of pharmacy and patient-centered healthcare. Pharmacist-provided care and care delivery transformation are expanding the opportunities for partnership and collaborations between with pharmacies, payers, and other healthcare stakeholders in achieving shared goals and delivering essential, high-quality and cost-effective care. PQA

recently released the Value-Based Pharmacist-Provided Care Action Guide as a set of 15 actions and strategies for pharmacies, payers, and other stakeholders to take in the adoption of pharmacist-provided care. This session will showcase these actions, facilitate a discussion, and ultimately aim to identify ideas and potential collaborations between stakeholders in carrying out the actions outlined in the Guide.

- **Loren Kirk**, PharmD, Director, Stakeholder Engagement, Pharmacy Quality Alliance
- **Laura Parker**, RPh, Staff Vice President, Clinical Pharmacy Services, IngenioRx
- **Mollie Patton**, PharmD, Manager, Clinical Program Development, Kroger Health

Q1-B Measuring and Acting on Medication Access Data in Real Time

- Medication adherence continues to serve as the primary indicator of medication access. Yet, there are upstream factors (i.e., financial and non-financial) that, if not addressed, may disrupt the patient’s ability to receive needed medication. To that end, PQA developed a conceptual framework to better define medication access and to identify priority gaps for quality measurement and improvement. Using the framework, healthcare stakeholders can implement various levers to align their core business or organizational functions to drive improvement in medication access. This session will explore how innovative technologies based on the PQA Medication Access Conceptual Framework can be incorporated into healthcare organizations to automate care coordination.
 - **John Bernot**, MD, Chief Medical Officer, Bravado Health
 - **Sherry Dillon**, RN, Vice President, Product Management, Bravado Health

Q1-C Partnerships for Better Care: Pharmacists in Medical Groups to Improve Transitions of Care

- Realo Drug recently completed a project through the Community Pharmacy Foundation focused on improving the quality of care during healthcare transitions. This session will describe the power of interdisciplinary teamwork, medication safety, and impact of quality metrics.
 - **Christina Nunemacher**, PharmD, Clinical Pharmacist, Realo Drug

Q1-D Increasing Patient-Community Capacity to Engage on Quality of Health Care

- How can quality measures reflect aspects of care and outcomes important to patients if people with chronic conditions aren't part of the process? Only through improved communications and greater patient engagement, will researchers, payers, and policymakers be able to refine quality-related efforts in a way that improves health care. This session will describe a patient-driven, multi-stakeholder collaboration to develop an interactive,

online educational program to increase the patient-community capacity to engage on quality of health care.

- **Eleanor Perfetto**, PhD, MS, Executive Vice President, Strategic Initiatives, National Health Council
- **Adam Thompson**, Regional Partner Director South Jersey AIDS Education & Training Center, Jefferson Health New Jersey – Infectious Diseases

Q1-E Best Practices Opioid Prescribing

- This Session will discuss opioid prescribing best practices through health system and individual level interventions. The talk will cover methods used at Johns Hopkins Medicine to develop and implement best practices and how this work has translated to a national quality collaborative and research partnerships with PQA and Epic. The content will include co-prescribing of naloxone, changing prescription defaults based on prescribing guidelines for post-operative patients and individualized provider feedback.
 - **Heidi Overton**, MD, General Surgery Resident, Johns Hopkins University School of Medicine

11:00am 11:15am
 11:15am 11:45am
Q2-F

Exhibits Open/Break

Quick Quality Quips – Session 2 (5 concurrent sessions)

Initiation and Implementation of a Value-Based Contract in Medicaid: Model Creation and Implementation

- Pharmacy Management Consultants (PMC), the pharmacy benefit manager for Oklahoma Medicaid, has engaged in negotiations with manufacturers regarding pharmacy-based value-based contracts for more than 2 years and is on the forefront of pharmacy value-based contracting in Medicaid. PMC has encountered many barriers including but not limited to: best price implications, manufacturer consumer price index (CPI) penalty concerns, contracting limitations, manufacturer responsibilities, data collection, and other barriers. Medicaid is a unique regulatory environment with limitations other payers may not encounter. Using a standard template PMC has met with different drug manufacturers to develop these value-based contracts. Currently, PMC has 4 contracts in place each presenting a unique challenge with varying degrees of complexity. The intended goal of this session is to share challenges and best practices about the models that have been initiated.
 - **Terry Cothran**, DPh, Director, Pharmacy Management Consultants

Q2-G Matching Outreach to the Member: How Targeted Interventions Can Improve Pharmacy Quality and Financial Outcomes

- Learn how health plans, pharmacies, and providers can collaborate in member outreach and get more from medicines. As health plans strive to improve quality measures, manage costs, and improve member adherence,

a comprehensive pharmacy service can help achieve those goals by addressing the needs of plans' most complex members. Join this session to discover how the latest trends in population health are carving out a bigger role for comprehensive pharmacy services directed toward medically complex plan members.

- **Kerri Petrin**, MPH, Vice President, Business Development & Strategy, RxAnte, Inc.

Q2-H

Filling Gaps in Patient-Reported Performance Measures for Oncology

- Including the patient voice in quality measurement is a priority, but difficulty developing methodologically-sound patient-reported measures (PRMs) and implementing meaningful patient-reported performance measures (PR-PMs) has contributed to gaps in the availability of PR-PMs for accountability programs. With funding from the National Pharmaceutical Council, Discern Health researched patient-reported measurement in oncology to chart a path for gap-filling. The project included: performing an environmental scan and measure gap analysis; interviewing stakeholders and experts; and facilitating a multi-stakeholder roundtable to explore challenges and opportunities. This session discusses the landscape and use of available PRMs and PR-PMs. It explores key concepts from provider, patient, and researcher perspectives and offers recommendations for filling gaps in availability of meaningful patient-centered measures, including those related to medication and treatment toxicity.
 - **W. Garth Callaghan**, Patient Advocate, Author & 'The Napkin Notes Dad'
 - **Karen Fields**, MD, Medical Director, Clinical Pathways & Value-Based Cancer Care, Moffitt Cancer Center
 - **Theresa Schmidt**, MA, Director, Discern Health

Q2-I

Data Analytic Support of a Narcotic Safety Initiative in a Large Managed Health Plan

- To address opioid overuse for chronic noncancer pain, in 2015, Blue Shield of California implemented a narcotic safety initiative with a goal of cutting opioid use by 50% by end of 2018. The initiative includes multiple evidence-based interventions including formulary design, risk-based case management, & partnering with physician groups to reduce high-risk prescribing patterns & prevent patients newly starting opioids from progressing to unnecessary chronic use. The integration of comprehensive data analytics is a key factor contributing to the success of this initiative. In this session, we will share how we approached analytics supporting this initiative overall. We will share how we used data analytics to track our initiative's progress toward its goals; provide information on potential areas of opportunity to pursue; & used data to find out something that hasn't been answered in previous studies.
 - **Denis Ishisaka**, PharmD, MS, Clinical Pharmacy Program Manager, Blue Shield of California

Q2-J

Optimizing Performance-based Pharmacy Reimbursement

- Performance-based pharmacy reimbursement programs have existed for several years and the complexity and impact of those programs continues to increase, particularly in Medicare populations. Hear about general components of these programs, available information to understand your performance, how pharmacies may target adherence efforts to have the greatest impact, and how these programs and the available performance information may change in the future.
 - **William Grambley**, MBA, Chief Operating Officer, AllazoHealth
 - **Jeff Newell**, RPh, Chief Executive Officer, Pharmacy Quality Solutions

12:00pm 1:15pm
1:30pm 2:30pm

B1-A

**PQA Quality Awards Recognition Program and Luncheon
Breakout Session 1 (5 concurrent sessions)**

Opioid Abuse Prediction: Using Socio-demographics to Generate Insights

- Healthcare organizations need to understand the health concerns of specific populations, so they can design effective outreach programs, manage care, and contain costs. But health risk assessment (HRA), claims, and enrollment data are no longer enough -- they don't provide the consumer insights needed to pinpoint communications, marketing and other outreach strategies. Providers, researchers, and payers can combine cutting-edge segmentation methodology with a rich set of healthcare-specific consumer lifestyles, attitudes, and behaviors to better understand health status, disease prevalence, substance abuse, illness burden, and more. The speakers will share examples from organizations that are using socio-demographic data to understand who their high opioid users are and what socio-demographic factors may predict potential abuse.
 - **Katherine Haverty**, MS, Pharmacy Analytic Advisor, IBM Watson Health
 - **Brandi Hodor**, BS, Analytic Advisor, IBM Watson Health
 - **Lisa Latts**, MD, MSPH, MBA, Deputy Chief Health Officer, IBM Watson Health

B1-B

Innovative Pharmacist Practice Model: Impact on Patient Care and Outcomes

- Suboptimal medication use, increasing complexity of drug regimens, and focus on shared accountability for clinical measures drive the need to leverage the medication expertise of clinical pharmacists in direct patient care. An effective strategy being adopted by the primary care community is to foster collaboration between clinical pharmacists and physicians to provide advanced patient care management, such as medication and disease management. This session will highlight innovations in a large academic institution as they integrated clinical pharmacists as a vital member of the team-based care model in the ambulatory care setting. In

addition, a unique collaboration between physician organizations, a payer, and a statewide coordinating center to improve patient care and address medication-related challenges will be presented.

- **Hae Mi Choe**, PharmD, Chief Quality Officer, University of Michigan Medical Group; Associate Dean & Clinical Associate Professor, College of Pharmacy, University of Michigan

B1-C Risk Adjustment of Adherence Quality Measures: Need, Strategies, and Impact in the New Quality Landscape

- Variations in pharmacy quality measure performance may be explained in large part by the nature of the patient population receiving services at the given pharmacy or health system. One approach to equitably capture quality for pharmacy Star ratings and reimbursement incentives is to conduct risk adjustment of quality measures for the patient mix. Previous research has tested several strategies for risk adjustment of pharmacy quality measures. This session will explore the need for risk adjustment and review available techniques for conducting risk adjustment. We use commercial and Medicare pharmacy claims to demonstrate the impact of these techniques on PQA-endorsed measures such as Adherence to Star Therapy medications. We explore the methodological underpinnings and practical consequences of risk adjustment and how risk adjustment may impact quality ratings and quality improvement strategies. Finally, key drivers of adherence and their impact will be presented.
 - **John Bentley**, PhD, Professor & Chair, Pharmacy Administration, University of Mississippi School of Pharmacy
 - **Beth Bauer**, MS, Senior Director, Advanced Analytics and Data Science, IQVIA
 - **Kim Borzillo**, Director, Product Management, IQVIA
 - **Sujith Ramachandran**, PhD, Assistant Professor. Pharmacy Administration, University of Mississippi

B1-D Developing a Pediatric Quality Measures Menu for Value-Based Care and Payment

- Child health providers, including children’s hospitals, are increasingly under pressure to demonstrate the value of the care they provide. In early 2019, the Children’s Hospital Association (CHA) is launching a Pediatric Quality Measures Menu listing approximately 70 quality measures ready for immediate adoption. CHA, along with Discern Health, convened a multi-stakeholder advisory panel to review existing measures and consider their relevance in assessing value of child health care from their unique and joint perspectives. The menu complements and incorporates other pediatric measure sets and adds pediatric acute inpatient and specialty care measures often missing in existing core sets. Some measures in the menu assess medication adherence and appropriateness with demonstrated poor performance and variation and/or disparities (e.g., antibiotic prophylaxis for children with sickle cell anemia, internal bowel disease safe and effective

medication use). CHA and Discern Health will facilitate a discussion among key stakeholders from the project’s advisory panel: children’s hospital, payer, and patient/parent representatives, and discuss how they prioritize the use of select measures and how measures may facilitate their efforts to actualize, improve, and demand high-value care for children and their families. The panel will also address remaining priority pediatric measure gaps.

- **Amy Basken**, MS, Director of Programs, Pediatric Congenital Heart Association
- **Gary Freed**, MD, MPH, Percy and Mary Murphy Professor of Pediatrics, Professor of Health Management and Policy, University of Michigan
- **Amy Helwig**, MD, MS, Chief Quality Officer & Vice President, Quality Improvement & Performance, UPMC Health Plan
- **Sally Turbyville**, DrPH, MS, MA, Senior Fellow, Quality Policy & Research, Children’s Hospital Association
- **Tom Valuck**, MD, JD, Partner, Discern Health (Moderator)

B1-E

Carriers of the Patient Voice: Intersection of Science, Theatre, and Clinical Practice

- Since its inception in the 1950s, theater pedagogy has been a useful tool for educating audiences on a variety of subjects. In healthcare, theater has promoted public health, simulated patient-provider interaction, and, more recently, relayed the patient experience to providers. While the experiences of patients with specific disease states, including cancer and HIV/AIDS, have been presented to various providers, there is no production known to specifically address patients’ medication experiences and the quality of life lived with those medications. With nearly 70% of Americans taking prescription drugs, we acknowledge a need for an educational tool to understand patients’ experiences with medications and the value of those stories to quality measures. This session will explore symptoms, medications, and metrics through the lens of the patient using a scene, “Interference,” from the play project Go Ask Alice. Speakers will introduce how social determinants of health impact patients and communities, and how understanding these determinants and consequent health disparities can shed light on how to better include the patient voice in quality.
 - **Vibhuti Arya**, PharmD, MPH, Associate Clinical Professor, St. John’s University College of Pharmacy & Health Sciences
 - **Paul Ranelli**, BSPHarm, MSc, PhD, Professor, University of Minnesota College of Pharmacy Duluth
 - **Terri Warholak**, PhD, Assistant Dean, Academic Affairs & Assessment, University of Arizona, College of Pharmacy

2:30pm 3:00pm
 3:00pm 4:00pm
B2-F

Exhibits Open/Break
Breakout Session 2 (5 concurrent sessions)
Employer-Based Healthcare: Exploring Relationships to Deliver Quality Care

- Employers, in aggregate, are the largest healthcare payer in the United States. Thus, understanding commercial needs and priorities is critical in the healthcare quality paradigm. The first part of this session will describe employer-funded healthcare, including the various healthcare purchasing alliances. Next, the relationships between employers, pharmacies, and payers will be examined. This will provide kindling for disruption and opportunity. Finally, the session will highlight effective collaborations between employers or healthcare purchaser coalitions, health plans, and pharmacy benefit managers. These success stories will showcase the elements necessary for positive and proactive healthcare delivery.
 - **Prateek Bhatia**, BPharm, MS, PhD, Assistant Vice President, Health Plans, University of Southern California
 - **Loren Kirk**, PharmD, Director, Stakeholder Engagement, Pharmacy Quality Alliance
 - **Jay Nadas**, PharmD, Director of Health & Wellness Business Development, Topco Associates
 - **Lauren Vela**, MBA, Senior Director of Member Value, Pacific Business Group on Health

B2-G

Best Practices in Deprescribing

- Polypharmacy is being recognized as a growing concern in the literature. With more medications, patients have complex medication regimens, often leading to non-adherence, adverse drug events, unnecessary acute care use, and a reduced quality of life. Kaiser Permanente will share best practices in developing and implementing deprescribing programs in several populations, including those with hyperpolypharmacy (taking 10 or more medications) or for those taking opioids, benzodiazepines, antidiabetics, antihypertensives, and other common drug classes. Lessons learned, best practices, and key frameworks will be shared to help other providers and health systems create similar programs to deprescribe effectively and improve outcomes. Outcomes from existing programs will be shared and discussed. A primer on behavioral science will be provided to help attendees shape effective deprescribing conversations with patients, caregivers, and providers.
 - **Elizabeth Bentley**, MSJ, PharmD, Director, Clinical Pharmacy Services, Kaiser Permanente Northwest
 - **Lynn Deguzman**, PharmD, Regional Clinical Operations Manager, Kaiser Permanente

B2-H

Design, Implementation, and Evaluation of Quality Aligned Outcomes in Specialty Pharmacy Practice

- Specialty pharmacies are increasingly accountable for ensuring optimal outcomes of costly specialty agents. However, there is a disparity in valid and consistent outcomes measures in most specialty disease states.

Therefore, a need exists to develop quality measures for specialty medication use that are feasible, applicable, and clinically relevant across institutions. Such measures will improve safety and efficacy monitoring of these medications and allow for benchmarking across the industry. This session will describe the role of specialty pharmacies in improving the quality of specialty medication use, and provide examples of three institutions that have designed, implemented, and evaluated quality metrics in a specialty pharmacy practice. These examples provide tangible use cases for the benefits and processes of ensuring quality in specialty medication use.

- **Rebekah Anguiano**, PharmD, Clinical Coordinator, Specialty Pharmacy Services, University of Illinois Hospital and Health Sciences System
- **Scott Canfield**, PharmD, Assistant Director, Clinical Program Development, Johns Hopkins Home Care Group
- **Nisha Shah**, PharmD, Staff Pharmacist, Vanderbilt University Medical Center, Vanderbilt Specialty Pharmacy
- **Autumn Zuckerman**, PharmD, Program Director, Health Outcomes & Research, Vanderbilt University Medical Center, Vanderbilt Specialty Pharmacy

B2-I

The Core Quality Measures Collaborative (CQMC): Advancing Quality Measurement and Improvement through Core Measure Sets

- The CQMC is a broad-based coalition of health care leaders, including CMS, health insurance providers, primary care and specialty societies, and consumer and employer groups. Its members work together to identify core measure sets-- succinct groups of high value, evidence-based, and patient-focused measures for consistent use across a broad set of programs. Through promotion of the core measure sets, the CQMC seeks to encourage quality measure alignment across public and private payers, reduce provider measure reporting burden, offer consumers actionable information about provider performance, and improve care quality and health outcomes. This session will be a roundtable discussion with CQMC leaders representing AHIP, CMS, and NQF. The speakers will provide an in-depth look at the measure set development process, measure set adoption among public and private payers, challenges and potential barriers to measure set implementation, and the future direction of the Collaborative.
 - **Jake Galdo**, PharmD, Director, Performance Measurement, Pharmacy Quality Alliance (Moderator)
 - **Danielle Lloyd**, MPH, Senior Vice President, Private Market Innovations & Quality Initiatives, America's Health Insurance Plans
 - **Erin O'Rourke**, Senior Director, National Quality Forum
 - **Michelle Schreiber**, MD, Director, Quality Measurement & Value-Based Incentives Group, Centers for Medicare & Medicaid Services

B2-J

Part D Enhanced MTM Model: Innovation Highlights

- This session will summarize activity to date for CMS’ Center for Medicare and Medicaid Innovations’ Part D Enhanced Medication Therapy Management (MTM) Model. The objectives of the five-year model are for stand-alone Part D Prescription Drug Plans to identify and implement innovative strategies to optimize medication use, improve care coordination, and strengthen system linkages. Highlights of performance-based results for 2017, the first performance year of the Enhanced MTM Model will be shared. This session will also describe some of the innovative strategies employed by model participants to enhance MTM services aimed at improving the quality of care while also reducing costs.
 - **Samm Anderegg**, PharmD, MS, Chief Executive Officer, DocStation
 - **Steven Gilbert**, MBA, Vice President, Performance Improvement, Tabula Rasa Health Care
 - **Deborah Rogal**, MPP, Health Insurance Specialist, Centers for Medicare and Medicaid Services/CMMI

4:15pm 5:15pm

General Session

The Water Coolers

For an entertaining change of pace during a rigorous education and networking meeting, The Water Coolers will deliver their high energy, uncommonly funny, honest take on work and life. Smart phones, conference calls, kids, co-workers, and travel are just a few of the topics this group of top NYC talent turns into hilarious sketch comedy and song.

5:15pm 6:30pm
 5:15pm 7:15pm
 6:30pm
 7:30pm 9:00pm

Exhibits Open/Networking Reception
Poster Session
Evening Open
PQA Co-Chair Appreciation Event *(by invitation)*

Friday, May 17, 2019

6:00am 7:15am
 7:00am 12:00pm
 7:30am 9:00am
 7:30am 8:40am
 9:00am 10:15am
 10:15am 11:00am

PQA Fun Run/Walk - led by the Baltimore chapter of "Back on My Feet"
Registration Open
Exhibits Open/Continental Breakfast
Innovation Theaters
Healthcare Quality Innovation Challenge
General Session

PQS Trend Report in Pharmacy Quality

The degree of uncertainty and pace of change taking place within the healthcare environment requires collaboration and partnership. In order to collaborate with other stakeholders we must understand our unique languages, goals, and interests that often present as barriers to meaningful progress. To help facilitate this



opportunity and create a common “language”, PQS has created the first trend report to reveal survey responses from patients, pharmacies, and payers as it relates to pharmacist-provided services and value-based performance programs.

- **Todd Segal**, PharmD, Vice President, Client Relations & Services, Pharmacy Quality Solutions

11:00am	12:00pm	PQA Rapid Fire Research Rounds
12:00pm		Adjournment