

A large, circular background image showing the back of a man in a dark suit and light blue shirt, looking towards a blurred event space. The image is overlaid with a large white circle containing the title text.

2023 PQA ANNUAL REPORT



OF PROGRESS TOWARDS BLUEPRINT PQA 2025

September 2022 - August 2023

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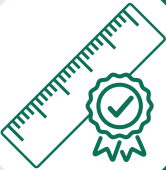


19 NEW MEMBERS



3 MEASURE WORKGROUPS

Launched in High-Impact Areas



14 PQA MEASURES
currently implemented
in CMS programs



400 ANNUAL MEETING REGISTRANTS



18 HOURS
of Continuing Education
Programming Launched



100 STAKEHOLDERS
participated in PQA
Convenes: Pharmacy
Performance Measure



40+ EXPERTS
participated in PQA
Convenes: Oncology



18 STUDENT
program participants



22 DIVERSE QUALITY LEADERS
program participants



4 PILOTS
to test blood pressure and
hemoglobin A1C pharmacy
measure concepts

Dear PQA members



For more than 15 years, PQA's expertise, influence, and impact on quality medication use has consistently grown. Thank you for your tremendous support and engagement in PQA programs, initiatives and convening activities.



This has been an exciting year for our organization! PQA continues to play a central role in driving meaningful improvements and positive changes in the health care system related to medication safety, adherence and appropriate use. These efforts are grounded in our shared mission and led by our passionate and engaged Board, team, members and stakeholders, whose tremendous contributions to our success are vital and cannot be understated.

We're in the second year of implementing PQA Blueprint 2025, our member-informed and board-breathed strategic plan. This blueprint is the north star for our team and organization as we continue to explore new and innovative approaches to quality medication use. Aligned with the priorities of our members, this blueprint focuses on four key areas: quality measure innovation and modernization; improving the quality of pharmacist-provided care; addressing health equity and diversity, equity, and inclusion; and ensuring organizational excellence.

Many of PQA's notable accomplishments are detailed in this report, and we're proud to share them with you. I'd like to highlight several:

- Our leadership in measure development continued with the endorsement of a composite proportion of days covered measure and the launch of two technical expert panels.
- Our research and convening efforts focused on pharmacy measures, as well as oncology, laying the groundwork for future measure development and research initiatives.

- We began building the Quality Innovation and Research Center (QuIRC) and published the second edition of the PQA SDOH Resource Guide.
- We refreshed our logo and color scheme to reflect our modern and forward-looking mindset.
- We hired a new Chief Operating Officer to support our operational excellence efforts and continued to expand our quality-focused team.
- We launched the Diverse Quality Leaders Program to support a new generation of leaders for our field.

For more than 15 years, PQA's expertise, influence, and impact on quality medication use has consistently grown. Thank you for your tremendous support and engagement in PQA programs, initiatives and convening activities.

I am grateful for the leadership and vision of our Board of Directors in shaping the future for PQA. It's an honor and privilege to serve as PQA's CEO, and I am excited for the continued opportunity to work alongside each of you to achieve our shared goal of quality medication use.

Kind regards,

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

Blueprint 2025

PQA BLUEPRINT 2025

Blueprint PQA 2025 is our organization's vision for excellence and strategic plan. It features four goals and associated objectives that have been validated and sharpened by our members, our Board and staff through an iterative process. Together, we have set the course for PQA's work through 2025 to advance medication use quality.

GOAL 1

Lead innovation and modernization of medication use quality to deliver solutions for a person-centered and value-based healthcare system.

GOAL 2

Advance the quality of pharmacist-provided care and services that optimize medication use, adherence and safety.

GOAL 3

Champion diversity, equity and inclusion and address health disparities in medication use quality.

GOAL 4

Achieve organizational excellence through structure and processes that deliver exceptional value to our members and stakeholders.

Goal 1

Lead innovation and modernization of medication use quality to deliver solutions for a person-centered and value-based healthcare system.



Measure Development and Stewardship: 2023 Summary

Measure Specification:

- Specialty Pharmacy Abandonment Rate (SP-AR) Technical Expert Panel
- COPD Treatment Ratio (CTR) Technical Expert Panel

Measure Testing:

- COPD Treatment Ratio (CTR)

Measure Endorsement:

- Proportion of Days Covered: Composite (PDC-CMP)

Measure Implementation & Maintenance:

- Health Equity Technical Expert Panel
- Retirement of:
 - Antipsychotic Use in Persons with Dementia: MDS (APD-MDS)
 - Initial Opioid Prescribing at High Dosage (IOP-HD)
 - Initial Opioid Prescribing for Long-Acting or Extended-Release Opioids (IOP-LA)
 - Use of Opioids at High Dosage and from Multiple Providers in Persons without Cancer (OHDMP)

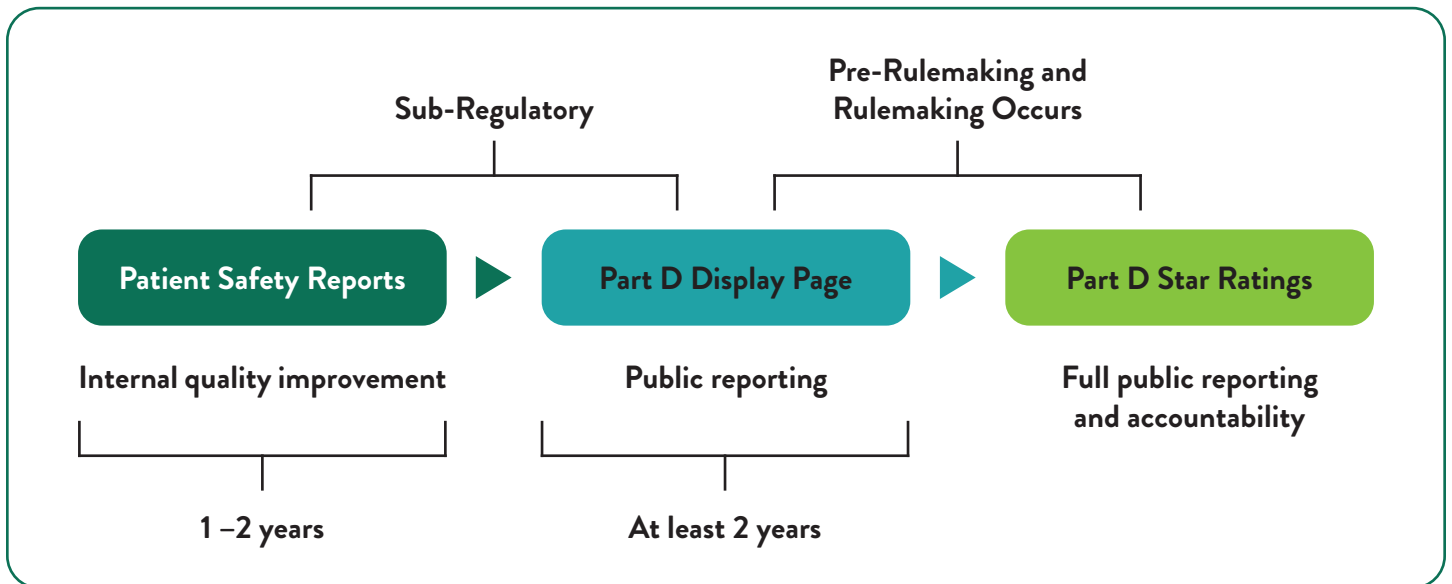
MEASURE IMPLEMENTATION

PQA Measures in CMS Quality Programs

PQA uses a systematic, transparent, and consensus-based process to conceptualize, specify, test, and endorse quality measures. Many PQA measures are used in CMS Quality Programs to evaluate safe and appropriate medication use among beneficiaries.

CMS created the Medicare Part D Star Ratings to provide quality and performance information to Medicare beneficiaries to assist them in choosing their prescription drug services. The Part D Star Rating for each Medicare Advantage (MA-PD) or standalone prescription drug plan (PDP) is determined through performance on numerous measures across several domains.

Measure implementation within the Part D program has three different components: the Patient Safety Reports, the Part D Display Page, and Part D Star Ratings. An example timeline detailing how long measures often reside in each of these components is summarized below. However, there is no guarantee that measures which are on the Patient Safety Reports or the Part D Display Page will become Part D Star Ratings measures.



Beyond Medicare Part D, PQA measures are also used to evaluate performance in CMS' Medicaid Adult Core Set as well as the Health Insurance Marketplace Quality Rating System (QRS).

PQA measures implemented in 2023 across federal programs are summarized here:

Medicare Part D		
2023 Patient Safety Reports 1. HIV Antiretroviral Medication Adherence 2. Persistence to Basal Insulin	2023 Display 1. Antipsychotic Use in Persons with Dementia 2. Use of Opioids at High Dosage in Persons Without Cancer 3. Use of Opioids from Multiple Providers in Persons Without Cancer 4. Concurrent Use of Opioids and Benzodiazepines 5. Initial Opioid Prescribing for Long Duration 6. Polypharmacy: Use of Multiple Anticholinergics in Older Adults 7. Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults	2023 Star Ratings 1. Adherence for Diabetes 2. Adherence for Hypertension 3. Adherence for Cholesterol 4. MTM Program Completion Rate for CMR 5. Statin Use in Persons with Diabetes
2023 Medicaid Adult Core Set	2023 Health Insurance Marketplace Quality Rating System (QRS)	
1. Use of Opioids at High Dosage in Persons Without Cancer 2. Concurrent Use of Opioids and Benzodiazepines	1. Proportion of Days Covered: Diabetes All Class 2. Proportion of Days Covered: Renin Angiotensin System Antagonists 3. Proportion of Days Covered: Statins 4. Annual Monitoring for Persons on Long-Term Opioid Therapy 5. International Normalized Ratio for Individuals on Warfarin	

PQA Sociodemographic Status Risk Adjustment

Health outcomes can be influenced by many factors other than the health care services received, including patient-related factors such as existing clinical conditions and sociodemographic status (SDS), which refers to a variety of socioeconomic (e.g., income, education, occupation) and demographic factors (e.g., age, race, ethnicity, primary language).

While risk adjustment for clinical conditions is a common consideration for quality measures in certain situations (particularly outcome measures), consensus on the appropriateness of adjusting quality measures for SDS-related risk factors is still evolving. Careful evaluation of SDS risk adjustment reflects an important component of health equity by ensuring that organizations that care for disadvantaged populations are measured fairly.

PQA published a frequently asked questions (FAQ) document that addresses background and basics of SDS risk adjustment and PQA's risk adjustment recommendations for the three adherence measures in Medicare Part D (PDC-Diabetes All Class, PDC-Renin Angiotensin System Antagonists, and PDC-Statins).

CMS finalized its plans to implement PQA's risk adjustment model for the adherence measures that will be phased in over three years. CMS will first display the SDS risk adjusted medication adherence measures for the 2024 measurement year (2026 display page), while the legacy adherence measures remain in the Star Ratings. The SDS risk adjusted measures will replace the existing medication adherence measures beginning with the 2026 measurement year (2028 Star Ratings). CMS also intends to incorporate the SDS risk adjustment operationally to these measures reported by CMS to Part D sponsors in the last monthly patient safety report for the measurement year.

PRE-DEVELOPMENT OF MEASURES

PQA's Plan to Improve Oral Anticancer Medication Use Quality

The use of oral anticancer medications (OAM) has increased significantly in recent years. There were at least 122 FDA-approved OAMs used in clinical practice in 2022. The quality of OAM use impacts clinical care, care coordination, patient safety and outcomes, including disparities in care, patient and caregiver experience, population health and prevention, and total health care costs.

To help improve the quality of care for individuals using OAMs, PQA created a “Quality Innovation and Research Initiative for Oncology.” Work on this initiative began in 2022 to identify research and measurement opportunities aimed at assessing the quality of OAM use.

PQA invited patients with lived experience, OAM experts, and stakeholders from pharmacies, health plans, health care providers, biopharmaceutical companies, associations and academia to participate in three PQA Convenes workshops between late 2022 and early 2023. The discussions were informed by an expansive environmental scan conducted by PQA to identify OAM quality gaps and existing measures relevant to OAM care. The scan identified eight quality issues related to OAM use, and a lack of relevant OAM-related quality measures for health plan and pharmacy performance assessment.

The evaluation of measure concepts during the workshops was framed by standard measure criteria, which include measure importance, scientific acceptability, feasibility, and usability. These criteria are critical for identifying and vetting measure concepts that can be successfully developed and effectively used in real-world settings.

The health plan measure concept for adherence or persistence to OAMs was rated highest among workshop advisors. To advance this concept, PQA will:

- Compile available measure specifications for metrics currently used by organizations for internal assessments of adherence or persistence to OAMs.
- Identify methodologies to assess OAM adherence and persistence that may be appropriate for health plan performance measurement.

- Conduct initial feasibility and validity assessments of prioritized adherence or persistence methodologies.

A separate measure concept of time-to-treatment was the top priority for pharmacy measurement. However, this concept significantly overlaps with the PQA-endorsed Specialty Pharmacy Turnaround Time (SP-TAT) pharmacy measure and a PQA pharmacy measure concept in development, Specialty Pharmacy Prescription Abandonment Rate. Additionally, time-to-treatment not captured in those two measures is largely outside of a pharmacy’s control, which is essential for appropriate attribution and fair measurement. PQA encourages the industry to use or pilot these existing measures to help clarify the degree to which they assess timely access to OAMs.

This OAM quality initiative is led by PQA’s Quality Innovation and Research Center (QuIRC), a strategic initiative to accelerate progress in medication use quality focused on clinical outcomes and provider contributions to care. QuIRC brings together the data, infrastructure and resources needed to develop new, complex quality measures; support their implementation; and create tools and solutions for improving medication use and medication management services. QuIRC is ideal for answering the methodology questions needed to advance the prioritized health plan measure concept for adherence or persistence to OAMs.

Through QuIRC, PQA will begin research to advance the health plan measure concept for adherence or persistence to OAMs in 2024.

Select Dissemination of Research Papers and Commentaries in Support of Goal 1

- Predictors of adherence to oral anticancer medications: An analysis of 2010-2018 US nationwide claims
- It is time for a new comprehensive medication review quality measure



Goal 2

Advance the quality of pharmacist-provided care and services that optimize medication use, adherence and safety.

PQA Launches Pilots to Evaluate Blood Pressure and Hemoglobin A1C Pharmacy Measure Concepts

The Pharmacy Quality Alliance (PQA) launched two proof-of-concept pilots to implement four promising blood pressure and hemoglobin A1C pharmacy measure concepts in value-based payment arrangements (VBAs) between payers and pharmacies.

The pilots will advance pharmacy quality measurement and patient care by evaluating the impact of innovative pharmacy services on A1C and blood pressure improvement and control. One pilot consists of Kroger pharmacies partnering with Kroger Prescription Plans as the payer. The second pilot pairs a regional payer with their pharmacy network, with technology vendors supporting data exchange and reporting.

These pharmacy measure concepts use a clearly defined attribution model to capture patient-pharmacy relationships and allow the use of a broad variety of data sources including prescription claims, medical claims, and clinical data from EHRs, pharmacy systems, labs, and more. As the health care system continues to move towards greater integration of data across settings, this measure design represents an important, forward-thinking approach to pharmacy measurement. The pilots will help characterize the ecosystem of data available for use in VBAs, determine measure feasibility in real-world settings, and enable PQA to refine measure specifications as needed to support standardized and accurate implementation.

Pharmacy Measures and Policy Considerations for Pharmacy Practice

At first blush, the development of pharmacy performance measures may not appear extraordinary. However, PQA's success is notable given the numerous challenges and complexities related to the development of feasible, reliable, and usable pharmacy performance measures due to important differences in level of attribution, intended use, data sources, and population sizes compared to health plan measures.

Beyond the challenges of developing measures, there are several important policy issues that could impact pharmacists' ability to positively affect the quality of care for patients through the use of pharmacy performance measures.

1. **Immunization Authority** – PQA has prioritized pharmacy performance measure concepts related to immunizations. To support pharmacists' ability to assess patients' immunization needs and successfully close gaps in care related to vaccinations, immunization authority should be consistent across states and pharmacy practice sites.

Uniform alignment of public health policies across states and practice sites, including authorizing pharmacists to order and administer all FDA-approved or authorized vaccines through independent prescribing authority, population health protocols, or collaborative practice agreements, allowing pharmacy technicians and student pharmacists to administer vaccinations and removing patient-specific restrictions such as age, would greatly enhance pharmacists' ability to improve the quality of care for patients through vaccination services.

2. **Therapeutic Interchange** – PQA has endorsed four pharmacy measures related to medication adherence and prioritized new pharmacy measure concepts related to medication management services. Optimized medication management is essential for patients living with diabetes, high blood pressure, asthma, chronic obstructive pulmonary disease, mental health, and other chronic conditions.

One policy change that could support pharmacists' success in delivering medication management services is authorizing therapeutic interchange of medications between classes of medications and diagnosed conditions. Therapeutic interchange, which may include initiating orders and prescribing, selecting the most appropriate medications within drug classes and disease states—and deprescribing of unnecessary, duplicative, or suboptimal medication therapies—empowers pharmacists, as the medication experts, to ensure that patients are on the best treatments possible.

3. **Pharmacy Care and Services** – Several of PQA's 14 prioritized medication management measure concepts are focused on reporting, improvement, and control of clinical biomarkers for hemoglobin A1C and blood pressure. As evidenced by pharmacy's responsiveness to the COVID-19 pandemic, pharmacies have established their role as accessible and convenient locations for patients to receive care and services. Recent expansions in pharmacist-led testing and treatment practice models at the state and federal levels have empowered pharmacists to perform a wider array of patient care services.
4. **Data Infrastructure and Interoperability** – Pharmacy performance measures require the use of innovative technology solutions to capture and communicate data beyond just prescription claims and dispensing information. The ongoing challenges related to accuracy, completeness and interoperability of data across systems of care, lack of standardization and the inability to share information between patients, providers, plans and payers in a timely manner, continue to cause disruptions in care.

When aligned across quality-based programs and providers, quality measures that reward quality improvement, including those utilizing pharmacy measures, have the potential to inform and support better quality of care.

What's Next?

PQA remains committed to this important effort, and now is the time to expand PQA's pharmacy measure development capacity. However, our ability to deliver at the necessary speed and scale is highly dependent on support and engagement from our members and stakeholders.

PQA convened stakeholders in November 2022, prior to the PQA Leadership Summit, to seek additional input on high priority pharmacy measure concepts. Those concepts informed updates to our plan that is responsive to rapid changes in pharmacy practice, health care delivery and trends in value-based arrangements.

PQA Convenes: Pharmacy Performance Measures

PQA convened 100 individuals from 67 organizations to address the status and influence the future of pharmacy performance measures. Industry leaders in pharmacy measures presented on the state-of-affairs for measures, including challenges and opportunities for the years ahead. Pharmacy measures differ from health plan measures in their data sources, attribution, intended use, and denominators.



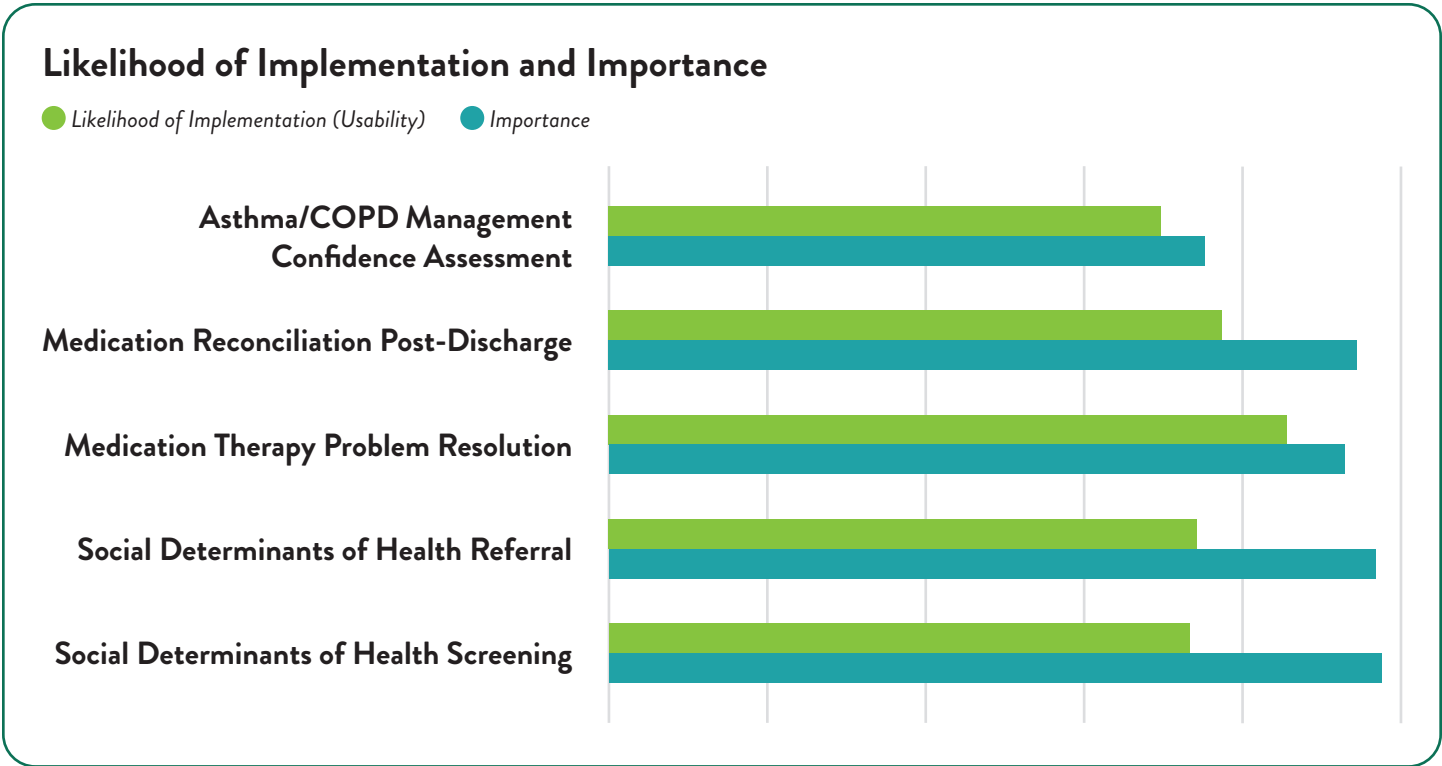
Health Plan vs. Pharmacy Measures

	Health Plan Measures	Pharmacy Measures
Data Sources	Access to standard data sources	Limited access to standard data sources
Attribution	Attribution based on enrollment	Complex attribution model based on patient-pharmacy relationship
Intended Use	Standard measures and quality programs	Lack of standard measures and quality programs
Denominator	Larger target populations	Smaller denominators limit reliability*

**If the minimum denominator is not met, measure results do not distinguish true differences in performance and will not lead to sound conclusions about the quality of care provided*



For the conclusion of the program, attendees were polled about a variety of different measure concepts related to the importance and usability of five measure concepts. The results of this poll gave PQA insights of the usability and importance of measure concepts relative to one another. PQA uses these results alongside the feasibility and scientific acceptability of measure concepts in order to inform future efforts in pharmacy performance measure development.



Value in Medication Use:

The 2022 PQA Leadership Summit

At the 2022 PQA Leadership Summit, we explored the goals, opportunities and challenges in measuring value in medication use from the patient, provider, purchaser, payer and manufacturer perspective.

We brought our members together to share their ideas and work, to foster collaboration and partnerships, and to support alignment across our health care system.

On day one, PQA CEO Micah Cost sat down for a chat with CMMI’s Chief Medical Officer Dora Hughes about policy and value. She leads CMMI’s work on health equity and provides clinical leadership and input on innovation models.

On day two, Cost moderated a lively discussion between PQA Board members Jim Kirby of Kroger and Michael Taday of Humana. They shared their needs, desires and perspectives in value-based insurance design and the opportunities for payer-pharmacy collaboration.

Other sessions featured thought leaders from IQVIA, the Patient Advocate Foundation, the National Health Council, PCORI, AMCP, Eli Lilly, the National Committee for Quality Assurance, the National Quality Forum and more.

The 2022 PQA Leadership Summit enabled PQA stakeholders to hear from industry leaders about value in medication use and informed PQA’s work in this area.

Select Dissemination of Research Papers and Commentaries in Support of Goal 2

- A Checklist for a Consistent, Comprehensive Medication Review
- Specialty pharmacy turnaround time impediments, facilitators, and good practices



Goal 3

Champion diversity, equity and inclusion and address health disparities in medication use quality.

Prioritizing Diversity, Equity and Inclusion at PQA

PQA is dedicated to improving safe, effective and appropriate medication use and addressing issues that impact a person's ability to access and use medications. Many of those issues are driven by inequities in our society and health care system.



As we work to address disparities that affect medication use quality and patient outcomes, we believe that a diverse, equitable and inclusive workforce will strengthen PQA's efforts.

Diversity, equity and inclusion (DEI) have rightfully become a priority for health care organizations across the nation. We have a responsibility

to improve DEI because it directly affects patient outcomes and quality of life.

In 2023, we launched the "PQA Diverse Quality Leaders Program" to provide expanded opportunities for individuals at various career stages to become leaders in quality. PQA believes that diverse leaders and teams make decisions that are more responsive to the needs, perspectives and interests of diverse populations.

The PQA Diverse Quality Leaders Program is open to individuals from racial, ethnic and other minority groups who are underrepresented in quality and health care leadership positions. PQA is particularly interested in increasing representation in its programs among

individuals who are Black or African American, Hispanic or Latino, American Indian or Alaska Native, Native Hawaiian or other Pacific Islander or Asian.

So much of professional development and career advancement is driven by personal, educational and professional networks. If our expert panels and our advisory and governing bodies are not diverse, equitable and inclusive, it is in part because our pathways to participation have not effectively engaged or supported underrepresented communities. This is true for all organizations and industries.

Our Diverse Quality Leaders Program helps address these gaps. Initially, the program has five distinct parts:

- A **Diversity in Quality Scholarship** program for minority health care professional students to attend the PQA Annual Meeting and participate in the pre-meeting Medication Use Quality workshop.
- **Diversity in Quality Scholarships** for minority health care professionals and students to take the Medication Use Quality online continuing education and certificate program.
- Expanded **PQA Leadership Summit** participation opportunities for PQA member organizations to send an additional representative to the summit.
- A **Quality Shadowing program**, where individuals from diverse groups are invited to observe select nomination-based panels, such as PQA's Measure Concept Advisory Groups and Technical Expert Panels, to gain knowledge that can support selection for and participation in future panels.
- A **Diverse Voices in Quality** education series that showcases the successful career paths and experiences of medication use quality professionals from diverse groups at PQA member organizations.

These five programs launched throughout 2023 to better enable individuals from diverse backgrounds to participate in PQA initiatives.

PQA Expands the Social Determinants of Health Resource Guide

PQA expanded the PQA Social Determinants of Health (SDOH) Resource Guide. The second edition of this guide profiles 32 SDOH services, including 12 new services and updates to nine initiatives from the first edition. Created by PQA, the guide focuses on SDOH screenings, referrals and interventions conducted by or involving pharmacists or pharmacies.

The guide covers services that 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
- Transportation

The second edition also includes pharmacy-based, or pharmacy-involved SDOH services launched or expanded in response to COVID-19 and are being continued post-pandemic.

The first edition of the guide, released in January 2022, was leveraged by a Patient-Centered Outcomes Research Institute-funded PQA project to identify patient-centered outcomes research priorities for improving SDOH screenings and interventions in pharmacy settings. The guide was instrumental in identifying real-world interventions and screenings that have addressed SDOH, specifically programs that are not described in peer-reviewed journals and other grey literature.



Equity and SDOH in Medication Use Quality

PQA has released an additional course to the updated Medication Use Quality continuing education program. “Equity and Social Determinants of Health (SDOH) in Medication Use Quality” dives into foundational information about health equity concepts and external factors that may impact health outcomes and medication use quality, including SDOH.

Underserved Communities

“Underserved communities” refers to populations sharing a particular characteristic, including geographic communities that have been systematically denied a full opportunity to participate in aspects of economic, social, and civic life, as exemplified in the definition of ‘equity.’”

Racial and
Ethnic Minorities

People with
Disabilities

LGBTQ+

Limited English
Proficiency

Rural
Geographic
Locations

Poverty and
Inequality

Centers for Medicare and Medicaid Services (CMS), CMS Framework for Health Equity 2022-2023 (Apr 2022). Accessed December 2022.

In the three years since the program was originally released, factors including the COVID-19 pandemic have intensified the focus on health disparities and their root causes, leading to a greater emphasis on health equity. Taking this changing landscape in mind, the equity and SDOH content in the Medication Use Quality continuing education program has expanded significantly.

PQA’s 2022-23 Executive Fellow, Jasmine Perry, PharmD, RPh, CPHQ, and Senior Director of Research, Melissa Castora-Binkley, PhD developed and deliver the first four lectures of this course which cover key health equity terms and vocabulary, tools to identify social need, methods to account for social risk factors in measurement and tactics to address social needs by setting.

Healthcare practitioners have taken a variety of approaches to address SDOH factors impacting the communities they serve. Tripp Logan, PharmD, Vice President at SEMO Rx Pharmacies & Services and Lead Luminary for CPESN Health Equity and Durdana Iqbal, PharmD, Clinical Research Fellow at the University at Buffalo School of Pharmacy & Pharmaceutical Sciences describe current interventions in community pharmacies aimed at addressing SDOH barriers and health inequity by bridging new roles with real-world examples.

Amanda Ryan, PharmD, BCGP, CPHQ, PQA Director of Education, closes the course by reviewing the PQA Social Determinants of Health Resource Guide, which documents real-world SDOH services involving pharmacists or pharmacies.

All Medication Use Quality continuing education courses are available now in the PQA Education Center. PQA members receive a 50% discount. Information on the member discounts can be found in the Member Resources Library.

Goal 4

Achieve organizational excellence through structure and processes that deliver exceptional value to our members and stakeholders.



QUALITY MEDICATION USE

A New Look Representing the Importance of Quality Medication Use

PQA has a new look! Our fresh and modernized logo and color scheme reflect our positive, forward-looking view of the vital role of medications in health care – and our role in bringing the industry together to improve quality.

PQA is proud to be the national association that unites the health care industry in support of quality medication use. We know that the safe, appropriate and effective use of medications is an essential part of preventing disease, managing chronic conditions and supporting overall long-term health, well-being and positive patient outcomes.

PQA’s reputation within the healthcare system remains stellar and synonymous with consensus-driven work to improve health care outcomes through high-quality medication use. That’s why “PQA” remains central to our image, identity and logo.

Through measurement, research, education and convening, everything we do drives towards quality medication use, which is our logo’s new tagline.

You’ll also notice a new element in our logo: a set of circles. They represent how our diverse members



Member Value Survey

For the second year, PQA conducted its *Member Value Survey* to gather feedback from stakeholders on the opportunities to participate in PQA’s initiatives. The results demonstrated high value delivery to members, with an average rating of 8-out-of-10 when asked about overall value of PQA membership.

Further, since 2022, notable improvements in value were seen with PQA’s Annual Meeting and Leadership Summit, technical assistance offered for measure use, and the opportunity to collaborate on pilot projects and research. Thoughtful feedback was provided related to PQA’s education opportunities, including how PQA can better communicate across our membership to ensure that available education opportunities are known by members so they can prioritize participating.

In the 2023 Survey, members were also asked more detailed questions related to PQA convening events. From the types of sessions offered, to the location of in-person meetings, to feedback on the potential of recorded content, survey participants offered their thoughts to best enable PQA staff to continue adapting offerings in future years.

If you missed the survey and have feedback for PQA staff, you can provide it throughout the year. Simply reach out to PQA’s stakeholder engagement team to provide written feedback or schedule a call to have a conversation with the team.

come together through PQA to build consensus. And everything originates from or leads to the “Q” in PQA – quality.

This is the first major update to PQA’s look since the organization was established in 2006. Our name, our

mission and our identity remain unchanged, and we continue to evolve from a position of strength.

In partnership with our 240 member organizations from across health care, we will continue to advance and communicate the value that performance measurement and related medication use quality initiatives bring to the health care system for improving care and outcomes.

Melissa Viscovich Joins PQA as Chief Operating Officer

Melissa Viscovich, CAE, IOM, joined the Pharmacy Quality Alliance (PQA) as Chief Operating Officer. She leads PQA's finance and operations to ensure the current and future success of the organization.



Focused on high-level impact, long-term strategy, culture cultivation and organizational effectiveness, Viscovich will oversee all operational and administrative functions, finance, human resources and information technology.

A member of PQA's executive leadership team, Viscovich will play an integral role in strengthening PQA's organizational capacity, best practices, systems and culture.

Prior to PQA, Viscovich served as Senior Vice President and Chief Operating Officer for more than 20 years at the National Association of Professional Employer Organizations (NAPEO).



Employee Engagement Survey

PQA's staff are its most valued asset, and that asset has been growing in recent years. Now at nearly 30 staff members, PQA has invested in growing the number of staff. Further, PQA has made tangible investment to enable staff professional and leadership development. These support Goal 4 of Blueprint PQA 2025.

To assess the impact of investment in staff, PQA conducts an annual employee engagement survey. There was sizable improvement in the lowest scoring areas from 2021 when reassessed in 2022. Further, in 2022, 95% of responses were positive in nature. The survey results indicate that PQA has built and maintains a positive work culture and supports its employees on their professional journey. In turn, this results in delivery of high-quality outputs for PQA stakeholders, stewarding the resources well that stakeholders commit to PQA.

PQA's executive leadership team continues to evaluate areas for improvement in employee engagement to appropriately allocate resources to recruit and maintain highly engaged employees. This, in combination with future upgrades to PQA technology, will enable optimized engagement for PQA stakeholders.

2023 PQA Annual Meeting Provides Actionable Insights on Evolving Quality Landscape



50 SPEAKERS ACROSS 20 SESSIONS

addressed new policies and industry trends in *Medication Use Quality* to nearly 400 leaders



The 2023 PQA Annual Meeting was May 10-12 at the Omni Nashville Hotel in Nashville, Tenn. The meeting is a top destination for health care quality professionals, who are focused on improving medication safety, adherence, appropriate use and medication management services.

Nearly 400 leaders from PQA member organizations were in attendance to network, engage and learn from more than 50 speakers across 20 sessions. Focused on the rapidly evolving health care quality landscape, the meeting's general sessions addressed:

- The Future of Medicare Part C & D Quality Programs,
- Solutions to Improve Equity in Medication Use Quality, and
- Implications of the Inflation Reduction Act on Medication Access and Affordability.

“The quality landscape looks far different than it did before the pandemic, and it continues to evolve,” PQA CEO Micah Cost, PharmD, MS, CAE, said. “The PQA Annual Meeting helps your team build relationships and grow your business by focusing on quality. It’s all about collaboration, and PQA’s ability to bring the industry together in the quest for quality medication use is unmatched.”

Cost opened the meeting with remarks on PQA’s work to modernize medication use quality measures, research to solve persistent measurement challenges and efforts to address health equity and improve diversity and inclusion.

In addition to thought-provoking general sessions, the meeting included 15 breakout sessions with cross-cutting industry perspectives on health equity, value-based care, pharmacist-provided care and more.

Across the meeting, there were numerous opportunities to build business relationships and forge new

partnerships in quality. A series of special sessions showcased successful approaches, technologies and emerging opportunities to improve medication services.

The 2023 PQA Annual Meeting proved to be a high-impact event for the healthcare leaders, offering a mix of industry trends, thought leadership, and networking that is unmatched by other national meetings.

PQA Healthcare Quality IQ Program Teaches Pharmacy Students the Fundamentals of Quality

PQA has a new program to teach pharmacy and other health professions students the basics of quality measurement and strategies to improve medication safety, adherence and appropriate use. The PQA Healthcare Quality IQ (HQIQ) program provides more than 20 hours of specialized learning opportunities in quality.

Sponsored by Pharmacy Quality Solutions (PQS), this new program centers around Medication Use Quality (MUQ), PQA’s nationally accredited continuing education and certificate program. Students selected to participate in HQIQ through a self-nomination process received scholarships to attend the 2023 PQA Annual Meeting, May 10-12, in Nashville, Tenn. The meeting included a special four-hour MUQ training event.

Following the meeting, students independently completed the Medication Use Quality program, an additional 11 hours of training. A final live, online workshop trained students how to construct a quality improvement proposal to improve medication use quality based on the Plan-Do-Study-Act problem-solving model. Students that develop and submit a quality improvement proposal following the live session receive a certificate commemorating their successful completion of the HQIQ program.

HQIQ is open to undergraduate and graduate students who have completed their second year of study in a pharmacy or other health care degree program.

For more information, visit the Student Programs page of the PQA website.



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.

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Thank you to the 2023 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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